

MEMBERSHIP / ANGLER REGISTRATION

PLEASE PRINT CLEARLY & FILL OUT ALL SECTIONS ON ALL PAGES! IF I CAN'T READ IT, I CAN'T DO MY JOB!!

<u>NAME</u>		
FULL MAILING		
ADDRESS:		
PHONE:	EMAIL:	
I HAVE RECEIVED, REA	AD, UNDERSTAND, AND AGREE	TO THE TERMS OF
THE BYLAW	/S FOR THE LAKE ISABELLA BAS	SS CLUB.
SIGNATURE		DATE:
IF UNDER 18 YRS. OLD,	PARENT SIGNATURE:	
		DATE: