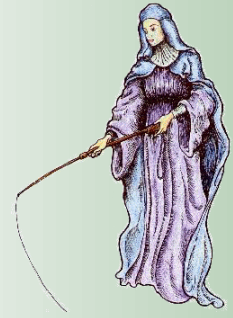




DAME JULIANA LEAGUE FLY FISHERS
NEW MEMBER APPLICATION FORM



(Check One): Individual (\$20)____ Family (\$25)____

Date: _____

Name (as it would appear on your nametag): _____

Address: _____

Phone (home): _____ Phone (cell): _____

Email address: _____

All new members will receive a Dame Juliana League vest patch.
(Additional patches /pins can be purchased at \$5 each)

A Membership Card will be sent to you in the mail upon receipt of your application. Applications received before May 1 provides membership through the end of the year. Applications received after May 1 provides for a membership term that expires at the end of the following year. Please make a copy of this application for your records. Dues made payable to the Dame Juliana League are not tax-deductible as a charitable contribution.

Send check or money order made payable to the :

Dame Juliana League
P. O. Box 178,
Kimberton, PA 19442

