



B.U.F.F.

Buckeye United Fly Fishers

Membership Application Form

Date: ____ / ____ / ____

Circle Membership Type:

Single: \$25 Family: \$30 Student: \$10
(age 24 and younger)

Bring this application form and dues payment to
a monthly BUFF meeting or mail to:

Buckeye United Fly Fishers
PO Box 498911
Cincinnati, Ohio 45249

*Make checks payable to: Buckeye United Fly Fishers Inc.
Students must provide proof of age and enrollment*

Name: _____

Name (as you want it to appear on your name tag): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

How did you hear about BUFF? _____

Meetings _____ Fishing Trips _____ Fly Tying _____ Fly Casting _____
Conservation _____ Rod Building _____ Net Building _____ Newsletter _____
Women's Events _____ Audio/Visual _____ Website/HTML _____

Other _____

Are you able to help teach any of the following?

Fly Tying _____ Fly Casting _____ Rod Building _____ Net Building _____

Other _____

For Family Memberships: list your spouse and children (under 18) who will need BUFF nametags.

Spouse Name: _____ Spouse Email: _____

Other Name: _____ Other Name: _____

Are you a member of Fly Fishers International (FFI)? Yes _____ No _____

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Your contact information is strictly for the purpose of BUFF communications and will not be shared with third parties





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New Member Dues Schedule

Student: \$10

Single: \$25

Family: \$30

New members joining in November or December will be considered paid through the ***following*** year.

Examples:

New Member joins BUFF in October 2016.
Their dues entitle membership for 2016.

New Member joins BUFF in November 2016.
Their dues entitle membership through **2017**.

**Adopted by the Board of Directors
February 19th, 2020**

