



B.U.F.F.

Buckeye United Fly Fishers

Membership Application Form

Date: ____ / ____ / ____

Circle Membership Type:

Single: \$30 Family: \$35 Student: \$15
(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? _____

Your Skills / Interests: Fishing Trips _____ Fly Tying _____ Fly Casting _____
Meetings _____ Audio/Visual _____ Website _____ Newsletter _____
Conservation _____ Women's Events _____ Public Education _____ Communications _____

Are you able to help teach any of the following?

Fly Tying _____ Fly Casting _____ Fly Fishing Fundamentals _____

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 _____



Your contact information is strictly for the purpose of BUFF communications and will not be shared with third parties. However, members may access contact information for BUFF purposes via a password protected website.



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New Member Dues Schedule

Single \$30

Family \$35

Student \$15

Membership year is from January 1st to December 31st.
However, funds received by new members in November or
December will be applied to following year's membership.

Adopted by the Board of Directors

January 21, 2026

