## Hobart Anglers 2019 Membership Form

## Annual membership \$35.00 per person

Make Checks payable to: Hobart Anglers

Name		·
Address		
City	State	Zip
Email	a i	,
Cell Phone a	# Alternate P	hone #
Emergency	Contact Name / Phone #	
With my pai	d membership, I accept and will abide by all ru	ules set forth by the Hobart Anglers Club
Signature:		Date: