

North Louisiana Fly Fishers Membership

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

eMail _____

_____ Family \$35

_____ Individual \$30

_____ Student \$20

_____ Associate \$15

Please fill out all of the information above so we can keep our files up to date.

Mail to:

**Howard Malpass, Treasurer
North Louisiana Fly Fishers
5825 Southern Avenue
Shreveport, Louisiana 71106**