FISHERS OF MEN

Jackson Hole, Wyoming Sept 27 - 30, 2018

Last Name	First Name			Middle Initial
Mailing Address				
City	State _		Zip	
Work Phone		_ Home Phon	e	
Cell Phone		Email		
Emergency Contact (Name	/Relationship)			
Emergency Contact (Phone	e Number)			
Travel Information	1			
Arrival Date &Time			O Jackson Hole	O Other
Airline/Flight #				
If you are not flying into JA	C, please provide d	etails:		
Departure Date & Time			O Jackson Hole	O Other
Airline/Flight #				
If you are not flying out of J	IAC, please provide	e details:		
Additional Informa	ATION			
How would you describe yo	our skill as a fly fishe	erman?		
O Beginner	O Intermediate	0	Experienced	
Fishing gear will be provide fly fishing gear?	ed by Hill Country C O Yes		o additional charge. Do y No	ou plan to bring your own
Do you have any dietary re	strictions?			
Do you have any questions	for us?			

Please mail your completed registration form and \$500 deposit to Fishers of Men.