



# MEMBERSHIP APPLICATION

Virginia Coastal Fly Anglers

P.O. Box 2866

Virginia Beach, VA 23450

<http://vcfa.org>

[VirginiaCoastalFlyAnglers@gmail.com](mailto:VirginiaCoastalFlyAnglers@gmail.com)

DATE: \_\_\_\_\_ example: (mm/dd/yyyy)

NAMES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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STREET ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_ example: (757)-000-0000)

EMAIL: \_\_\_\_\_

PLEASE CHECK:            NEW MEMBER            RENEWAL

Membership is **\$30.00** annually and includes all family members. Please complete this form with a check make payable to VCFA. You can bring the completed form and check to the next general meeting or mail it to our club treasurer at the P.O. Box listed above.

**Note: You can type the information directly on this form, then press alt+p keys to print it out for mailing.**