

Hobart Anglers

2025 Membership Form

Annual membership \$50.00 per person

Make Checks payable to: Hobart Anglers

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Cell Phone # _____ Alternate Phone # _____

Emergency Contact Name / Phone # _____

With my paid membership, I accept and will abide by all rules set forth by the Hobart Anglers Club.

Signature: _____ Date: _____

LIFE IS
SIMPLE...

EAT SLEEP
FISH

