

# RAY'S KIDS DAY-Saturday MAY 20, 2017

Sponsored by the Lake Erie Chapter of the International Federation of Fly Fishers

Learn Fly tying; Fly casting, Entomology, Fish with the Flies you tied, and much more!



**Mail applications to:** LEC-IFFF, % David Rosner, 77 Kathy Lane, West Seneca, New York 14224

For further information ([www.lake-erie-fff.org](http://www.lake-erie-fff.org)) or [dqrosner@aol.com](mailto:dqrosner@aol.com) or call 716-675-4766

Event held at: REINSTEIN WOODS & ENVIROMENTAL EDUCATION CENTER  
93 HONORINE DR, CHEEKTOWAGA, N.Y.

**An all-day event, beginning with Registration at 8:30 a.m. Seminars start at 9:00**

Participants – Ages 9 – 15 (limit - 36 youngsters-check our web site for availability)

**Each Participant must have their own Chaperone 21 or older!**

Participant and Chaperone =Total \$20.00 (checks or money order – payable to LEC – IFFF)

PARTICIPANT NAME (PRINT) \_\_\_\_\_ D.O.B. \_\_\_/\_\_\_/\_\_\_

ADDRESS \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE NO \_\_\_\_\_ Total Fee Paid by: Check \_\_\_\_\_ Cash \_\_\_\_\_

EMAIL ADDRESS (PRINT) \_\_\_\_\_

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**YOUTH HOLD HARMLESS AGREEMENT**

In consideration of the right granted me to participate in the Lake Erie Chapter of the International Federation of Fly Fishers, Inc. Kids Day, I the undersigned, in acknowledgement that I am doing so entirely upon my own initiate, risk and responsibility do hereby, for myself, my heirs, executors, and administrators, agree to remise, fully release, hold harmless, and forever discharge The Lake Erie Chapter of the International Federation of Fly Fishers, Inc., all their officers and volunteers, acting officially or otherwise, from any and all claims, demands, actions or causes of actions, on account of my death or on account of any injury to me or my property which may occur from any cause whatsoever while participating in the above named program. I fully understand the risks and dangers involved in fly fishing particularly in rivers, lakes, streams and ponds.

In the event of injury by accident while participating in the above named program, I hereby authorize the Lake Erie Chapter of the Federation of Fly Fishers, its employees, officers, members and agents to seek the appropriate medical attention as deemed necessary.

You authorize the Lake Erie Chapter of the FFF to use any picture taken of the participant during the event on the Lake Erie Chapter- Federation of Fly Fishers web site or other advertisement materials promoting the clubs events.

Name of Participant (**Please Print**) \_\_\_\_\_

Signature of Participant \_\_\_\_\_

Name of Parent or Guardian (**Please Print**) \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_

I have read this Agreement and fully understand the release I am giving. I further attest that I am the parent or guardian of the above participant and am an adult capable of consenting to this Agreement.