



Youth Information Form

Name (printed): _____ Birth Date: _____

Home phone number: _____ T- Shirt size: _____

Home address: _____

Mother's (female guardian's) name: _____

Mother's (female guardian's) place of work: _____

Mother's (female guardian's) phone number: Work: _____ Cell: _____

Mother's (female guardian's) email: _____

Father's (male guardian's) name: _____

Father's (male guardian's) place of work: _____

Father's (male guardian's) phone number: Work: _____ Cell: _____

Father's (male guardian's) email: _____

Experience Angling: _____

Family Members who Fish: _____

Emergency Contact Information

Contact Name: _____ Relationship: _____

Contact phone number: Work: _____ Cell: _____

Any Medical Problems (including known allergies): _____

NOTE: Finding Inspiration ~ Sharing Hope (F.I.S.H), Inc. reserves the right to approve/reject all applicants for participation. By completing this form, your child is not automatically approved to attend a session of the program. All approved applicants will be notified by a staff member of F.I.S.H, Inc. if/when program participation opportunities arise.