



Catskill Fly Fishing Center & Museum

Family Fly Fishing Adventure

The Catskill Fly Fishing Center and Museum will host a Family Introduction to Fly Fishing Weekend June 30 – July 1, 2007. This is an ideal time to start the summer and learn the basics of fly fishing as a family. This is a unique opportunity to explore the sport of fly fishing and start the summer together. This program is under the direction of professional instructors and licensed guides (The Phelan Family). Jeff and Erin Phelan with their two daughters Alicia (14) and Allie (9) will provide a hands on approach to fly fishing basics covering equipment, casting, entomology, knots, streamside techniques and presentation and actual fly fishing for the novice.

Class program starts promptly at 9:00 AM on Saturday, June 30th and will be completed at 4:00 PM on Sunday, July 1st. Optional Friday arrival is encouraged to get settled; a pre class presentation will be available.

Catskill Fly Fishing Center & Museum
 P.O. Box 1295
 1031 Old Route 17
 Livingston Manor, NY 12758
 [P] 845-439-4810
 [F] 845-439-3387
 Email: flyfish@catskill.net
 Web: www.cffcm.net

Tuition Includes:

- Saturday Lunch and Dinner
- Sunday Breakfast and Lunch
- A 2007 Family Membership to the Catskill Fly Fishing Center & Museum

Accommodations:

- Friday and Saturday night bunk house accommodations (boys and girls separate) or tent camping facilities
- Private Fishing Fees for special Sunday fishing experience
- Fly Fishing equipment will be available. Students over the age of 16 are required to possess a New York State Fishing License

A complete program schedule, on site camping information, optional accommodations, and instructors will be available upon request.

REGISTRATION

	Tuition	Please list any food Allergies _____
Family of 3	\$525.00	_____
Family of 4	\$650.00	Parents: _____
Family of 5	\$795.00	Child Name & Age: _____
Additional Family Member	\$150.00	_____
Total Due	_____	_____
50% Deposit	_____	Address _____
Remaining Payment	_____	City, State, Zip _____
Method of Payment:		Daytime Phone _____ Email _____
<input type="checkbox"/> Check <input type="checkbox"/> Enclosed <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard		
Credit Card # _____	exp date _____	Signature _____