

Introduction to Saltwater Fly fishing

RIDEM – Division of Fish and Wildlife
Aquatic Resource Education Program

Registration Form

Thank you for your interest. Please complete the registration form below and send, along with check or money order to the address located on back. Please copy as needed. All forms need to be received by September 23, 2025.

Number of Adults: _____ Number of Children: _____ (12 years and up only)

Adult(s):

Name: _____ Phone: _____

Address: _____ E-Mail: _____

Name: _____ Phone: _____

Address (If different than above): _____ E-Mail: _____

Name: _____ Phone: _____

Address (If different than above): _____ E-Mail: _____

Name: _____ Phone: _____

Address (If different than above): _____ E-Mail: _____

Child(ren):

Name: _____ Age: _____

Name: _____ Age: _____

We recommend that you bring your own waders; however, we do have a limited number chest waders available:

Does anyone in your party need chest waders? _____

If yes, please indicate shoe size: _____

Emergency Contact Information for both Adults and Children:

Name/Relationship: _____ Day/ Cell Phone: _____

Alternative Contact: _____

Continental Breakfast and lunch will be included with the program. Please check your preferred boxed lunch (includes sandwich, side salad, Cape Cod potato chips, and cookie):

	936	Willow Tree Chicken Salad on Country Wheat (Willow Tree chicken salad, lettuce, tomato)
	936	All American on Country Wheat (roast beef, turkey, ham, bacon, American cheese, lettuce, tomato, Thousand Island dressing)
	936	Italian Grinder (capicola, mortadella, salami, ham, provolone cheese, lettuce, tomato)
	936	Roasted Turkey on Country White (turkey, cranberry relish, lettuce, tomato, havarti cheese)
	936	VEGETARIAN: Caesar Wrap (romaine lettuce, croutons, olives, parmesan, creamy Caesar dressing)
	936	VEGETARIAN: Greek Wrap (feta cheese, black olives, romaine, lettuce, tomato, onions, Greek dressing)

Are there any allergies among those in your group? If so, please specify.

Demographic Information: At times the federally funded Aquatic Resource Education program is asked to provide demographic information about its programs, instructors, and facilitators. If comfortable please complete the following:

Gender:

Female: _____ Male: _____ Prefer not to answer: _____

Ethnic Group:

American Indian or Alaska Native _____ Asian _____
 Black or African American _____ Hawaiian or Pacific Islander _____
 Hispanic or Latino _____ Middle Eastern or North African _____
 White/Caucasian _____ Other(please specify) _____
 Prefer not to answer _____

**The fee for the 'Introduction to Saltwater Fly Fishing' program is:
\$30.00/individual**

Spaces are limited so please send the completed registration form and Check/Money Order, payable to the **ARE program, to the following address:**

RIDEM – Division of Fish & Wildlife
 Aquatic Resource Education Program
 1B Camp E-Hun-Tee Place
 Exeter, RI 02822

RIDEM PHOTO RELEASE FORM

The 'Introduction to Saltwater Fly Fishing' workshop is a fun and interactive program where media both within and outside of DEM may be present. Please complete the following:

May we use photographs/quotations of you and/or your child in RI DEM Division of Fish and Wildlife promotional materials such as brochures, newsletters, the DEM website, social media sites (Facebook, Instagram), etc.?

YES ___ No ___ (if yes, please sign the release below; feel free to make copies)
Photographer Name: RI Department of Environmental Management

I, _____, irrevocably consent to and authorize the use and reproduction of my image on the DEM website, brochures, social media platforms (Facebook, Instagram, etc.), and other publications, without compensation to me for purposes of promoting future Aquatic Resource Education and DEM programs. All photographs, reproductions, and displays, shall constitute the property solely and completely of DEM. I hereby waive all right, title, and interest in and to any and all photographs, reproductions, and displays of my image used in and for the above stated purpose.

I hereby release, discharge, and save harmless, the photographer, his/her representatives, agents, assigns, employees, or any person acting under the permission of the photographer, even in the case that the product may be distorted altered in any way, blurred or used in composite form. I hereby waive the right to approve the finished photograph or any copy, reproduction, and/or display, which may be used by the DEM for purposes of future ARE programs.

Signature _____ Date _____

Witness _____ Date _____

If there are children accompanying you under the age of 18, the Agreement or Waiver must be signed or approved by the parent or guardian, on their behalf, and on the behalf of the signatory, signing on their behalf.

I hereby certify that I am the parent or legal guardian of the above-named model, and do give my consent without reservations to the forgoing on behalf of him, her, or them, on behalf of myself.

Name _____ Relationship _____

Signature _____ Date _____



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RHODE ISLAND

