



**Registration Information:**

If you are interested in registering as a team of anglers, or would like to attend the BBQ, please fill out the following information and send this form, with your check made payable to **Casting for Recovery** at the address listed below.

\_\_\_\_\_ **I want to fish!**

Please fill out the team and individual angler information below, and send with your **registration fee of \$350.00** to Casting for Recovery 2Fly at the address below. *Please note: registration fee includes BBQ tickets for each angler and one guest!*

\_\_\_\_\_ **I can't fish, but I want to play and eat BBQ!**

Please reserve a spot for me and \_\_\_\_\_ friends (**\$15 per person**)

\_\_\_\_\_ **I wish I could come!**

I'd still like to support CFR's programs. Please send your check made payable to **Casting for Recovery** to the address listed below.

Send your registration fee, BBQ reservation or donation, made payable to:

**Casting for Recovery 2Fly**  
c/o Konkell  
301 E. Luray Avenue  
Alexandria, Virginia 22301

**Team Information:**

Team Name: \_\_\_\_\_

**Angler Information:**

Angler #1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Angler #2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Additional Guest Names: \_\_\_\_\_

**Questions??**

**Please send an email to [cfr\\_outreach@yahoo.com](mailto:cfr_outreach@yahoo.com) if you have questions or would like additional information!**