

Name of Veteran you are Sponsoring: _____ Phone#: _____



Al Lizotte

President & Founder

Section 501 © (3) EIN 30-0892881

AMBASSADOR'S
FORM

Fishing With Warriors, Inc.

I understand that although alcoholic beverages will be available for purchase on the trip during meals. Drinking if done at all, is expected to be in moderation. This trip is a healing trip.

Yes: _____ No: _____

I understand that all activities will be conducted for all attendees. Veterans are not to venture off in small groups at night to other venues.

Yes: _____ No: _____

I am presently taking pain medication or opiates for: _____

Yes: _____ No: _____

I give my permission to include the following information about me in an email to be sent to those attending the trip (please fill in)

Yes: _____ No: _____

Branch of Military in which you serve/served: _____

I understand that I will be rooming with another veteran or ambassador:

Yes: _____ No: _____

I give Fishing With Warriors (FWW) permission to use my picture in their promotions

Yes: (With my name) _____ Yes:(Without my name) _____ No: _____

My shirt size: Small _____ Medium _____ Large _____ XL _____ XXL _____

X# of veterans will be chosen for this trip. If there are more deserving candidates, they will be chosen by lottery. Those not chosen will be put into the pool for the next year's trip.

This trip is solely for veterans; one of the goals of the trip is to build camaraderie.

Thank You for taking the time in completing this application!

You will be responsible for filling out a questionnaire about the trip.

You will have to send out hand written Thank You Letter to one of our sponsors with a photograph of your catch.

You will have to fill out a truthful testimonial about the trip and what it meant to you.

Printed Name: _____

Signature: _____ Date: _____

www.FishingWithWarriors.us