

**2017 FOAM OUTFITTER  
Member Application**

**Annual Outfitter dues: \$125**

**NEW MAILING ADDRESS**

1. Fill out membership application
2. Write **\$125** check payable to **FOAM**
3. Fill out insurance questionnaire, calculate premium rate
4. Write insurance check payable to **Bissell Agency**
5. Put FOAM application, insurance questionnaire, and both checks in ONE ENVELOPE
6. **MAIL to: Bissell Agency, 4055 Valley Commons Drive, Unit A, Bozeman MT 59718**

**(Please Print in Readable Block Letters)**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Name \_\_\_\_\_ MT Outfitter License No. \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Check FOAM Voting Region:

Region 1, Flathead Area

Region 5, Madison

Region 2, Bitterroot/Clark Fork

Region 6, Gallatin

Region 3, Missouri

Region 7, Yellowstone

Region 4, Beaverhead/Big Hole

Region 8, Bighorn/Ft. Peck

I agree to abide by the Association Constitution, By-laws, and Code of Ethics.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**REMEMBER! NEW MAILING ADDRESS:  
Bissell Agency, 4055 Valley Commons Drive, Unit A, Bozeman MT 59718**

Membership year: January 1 through December 31, 2017

Membership questions? Call 406-763-5436 \* Insurance questions? Call 406.586.6230