

Michigan Steelhead & Salmon Fisherman's Association
C/O Renee Davis
1950 Grand River Dr NE
Ada, MI 49301
Phone: 616-363-3564
Email: mssfapays@gmail.com

Participating Partners Program Enrollment Form

This is to confirm your enrollment in the Participating Partners Program with the Michigan Steelhead & Salmon Fisherman's Association by offering a discount to our approx 10,000 members as an incentive to shop in your store above others.

In order for us to advertise and promote your business with our membership statewide, we ask that you confirm your participation in this program as outlined by signing and returning this letter to us at the address shown above.

If you have any questions or need to clarify your commitment, please feel free to contact us. Thank you for you contribution to the mutually rewarding program, and we look forward to working with you.

Very Truly Yours,



Renee Davis
Michigan Steelhead & Salmon Fisherman's Association

Participant Information:

Company Name _____

Contact Person _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Fax** _____

Web _____ **E-Mail** _____

Discount offered _____

We confirm our commitment to the above referenced discount incentive for the Michigan Steelhead & Salmon Fisherman's Association.

By: _____ **Date:** _____