

PLEASE REMEMBER - BEFORE YOUR INSURANCE CAN BECOME EFFECTIVE,
FFOAM must receive your 1989 Outfitter Member Application, Professional
Associate Member (Guide) Applications (if applicable) and 1989 Outfitter
and Guide Dues.

Outfitter Member Applications were sent to you in January - if you
have not already done so, please send me your completed Application. I
am enclosing with this mailing a Professional Associate Member (Guide)
Application. If additional Applications are needed, please copy the form
before completing the same.

RETURN THE INSURANCE APPLICATION DIRECTLY TO FBS INSURANCE,
BARTELS AGENCY and send me your Outfitter Member Application, any
Professional Associate Member (Guide) Applications, your 1989 Outfitter and
Guide Dues and your Ballot.

Thank you.

DAWNE SPILMAN SMITH
Secretary



FBS Insurance Bartels Agency

1941 HARRISON AVENUE
P. O. BOX 4208
BUTTE, MONTANA 59702

APPLICATION FOR FFOAM LIABILITY INSURANCE

5-1-89 TO 5-1-90

APPLICANT _____ LICENSE # _____

POST OFFICE/ADDRESS _____ ZIP CODE _____

1. NUMBER OF BOATS OWNED _____, YEARS IN BUSINESS _____

2. LIST ALL LOSSES IN PAST 3 YEARS (DATE, CAUSE, PAYMENT)

3. THE FOLLOWING COVERAGE IS AVAILABLE:

LIABILITY (\$500,000 SINGLE LIMIT) BODILY INJURY AND PROPERTY DAMAGE

ANNUAL RATES: 1ST BOAT \$275.00, EACH ADDITIONAL BOAT \$50.00

4. ADDITIONAL INSURED. PLEASE PROVIDE NAME AND ADDRESS OF AGENCY OR OTHER REQUIRING ADDITIONAL INSURED CERTIFICATES.

1. STATE OF MONTANA, BOARD OF OUTFITTERS

2.

3.

PLEASE LIST NAME, ADDRESS AND LICENSE # OF GUIDES YOU WILL USE DURING THE SEASON.

1.

2.

3.

4.

5.



GUIDES MAY BE COVERED AS ADDITIONAL NAMED INSUREDS AT NO CHARGE BASED ON THE FOLLOWING CONDITIONS:

1. MUST BE A FFOAM MEMBER IN GOOD STANDING
2. GUIDES' LICENSE MUST BE ENDORSED BY AN INSURED POLICYHOLDER.

ANY GUIDE NOT MEETING THE ABOVE CONDITIONS MAY APPLY FOR INSURANCE WITH THE APPROVAL OF THE BOARD OF DIRECTORS AT THE FULL ANNUAL PREMIUM.

5. PREMIUM COMPUTATION:

INITIAL BOAT: \$275.00

ADDITIONAL BOATS _____ X \$50.00 = \$ _____

TOTAL PREMIUM SUBMITTED \$ _____

POLICY PREMIUMS MAY BE PRO-RATED WITH APPROVAL OF THE FFOAM BOARD OF DIRECTORS.

COVERAGE TERM REMAINING: 3-6 MONTHS, \$150.00
0-3 MONTHS, \$ 75.00

6. SIGNATURE: _____ DATE _____

NOTE: YOUR INSURANCE BECOMES EFFECTIVE UPON PAYMENT OF THE PREMIUM AND ACCEPTANCE OF THE RISK. PLEASE SIGN AND FORWARD WITH YOUR REMITTANCE PAYABLE TO:

FBS INSURANCE BARTELS AGENCY
1941 HARRISON AVENUE
P. O. BOX 4208
BUTTE, MONTANA 59702
782-1288
494-5935 (evenings)

FRED WARDINSKY, AGENCY MANAGER
CONNIE DUTOIT, CUSTOMER SERVICE REPRESENTATIVE

BALLOT

VOTE FOR 5-PREFERENCE TO BE GIVEN TO
AREA DISTRIBUTION AS EXPLAINED IN
COVER LETTER

1) DAVE MINISTER []

OTHER _____

2) JOHN AZDA []

BRIAN NELSON []

OTHER _____

3) PAUL ROOS []

OTHER _____

4) ROBBIE GARRET []

OTHER _____

7) GORDON ROSE []

GEORGE KELLY []

OTHER _____

FFOAM NEWSLETTER

The annual meeting was very productive. There were more in attendance at this meeting than any other FFOAM meeting I have attended. There were some significant changes made in the By-Laws by the membership:

(1) The number of directors on the board increases from 3 to 7, and (2) the term served by each increased to 3 years from the current 2 years. Preference is to be given to those candidates residing in specific fishing areas designated by the board. These areas are;

- 1) North-i.e. Kalispell
- 2) West of the divide/Bitterroot
- 2) Great Falls/Helena
- 4) Southwest/Big Hole, Jefferson, Beaverhead
- 5) Ennis/West Yellowstone
- 6) Livingston/Bozeman
- 7) East-Big Horn

(3) The dues were increased from \$35/member and \$15/associate member to \$65/member and \$25/associate member. For those that have already paid the 1989 dues at the old figure, please send in the additional monies. If you have paid the proposed assessment, that amount will be added to your dues payment. There will be no assessment.

ELECTION OF DIRECTORS

The members decided that this election would be conducted by mail in order to allow for the participation of as many of us as possible. In addition to the list below you may choose to vote for a write in candidate of your choice.

AREA	CURRENT DIRECTOR	TERM EXPIRES	NOMINEES
1)	NEW	1992	Dave Minister
2)	NEW	1990	John Adza Brian Nelson
3)	NEW (Paul Roos)*	1991	Paul Roos
4)	Jack Hutchison	1989	Robbie Garret
5)	Ray Killian	1991	#####
6)	Al Gadoury	1990	#####
7)	NEW (Gordon Rose)*	1990	Gordon Rose George Kelly

* These individuals have been serving on the board as the result of appointments by the board. This was done to aid the board in handling the workload over the past year.

In addition to the ballot there is included in this mailing an application for 1989 insurance. The cost of the program for 1989 is quite a bit less than the one of 1988. All dealings on insurance by the members is to done directly with the agent. Calls to the agent are to be collect. To qualify for the policy a member must have paid the 1989 dues. I will be forwarding the names of members in good standing to the agent and only after he receives your name may he issue a policy. So pay your dues ASAP, the old policy expires on May 1st. Please note the provision for guide coverage.

At the meeting the members gave me a list of areas of concern, and future goals of the organization. When you return your ballot please include your thoughts on the direction the organization should consider in the coming year and the long term goals you would like to see pursued.

We are looking for members to become active in the work of FFOAM. In the current legislative session we worked with MOGA to defeat the two rivers bill. We took the lead on the outfitter workcomp bill and the voter participation (Board of Outfitters) bill. We feel at this time that both these bills will become law. There is a need to continue to fight for the rights of the fishing and floating outfitter. i.e. the day use policy of the FS, the enforcement of outfitter law on the river, etc.. If you want to help FFOAM in any way contact me. Possible committees to be formed; Governors Interm Study, Board of Outfitters, Communication, Legislative, Annual Meeting, Government Watchdog.

Return your ballot immediately, the deadline is two weeks after the postmark of this mailing. You might as well include your dues with the ballot so that I can get your name to the insurance company.

Jack D Hutchison, Ex. Dir.
P O Box 387
Sheridan, Mt 59749

Ray Killian, V. C.
P O Box 625
Ennis, Mt. 59729

Al Gadoury, Sec. Trea.
P O Box 6045
Bozeman, Mt. 59715

Gordon Rose*
P O Box 597
Ft. Smith, Mt. 59035

Paul Roos*
1630 Leslie
Helena, Mt. 59601

FFOAM

FISHING AND FLOATING OUTFITTERS ASSOCIATION OF MONTANA



PROFESSIONAL ASSOCIATE MEMBER APPLICATION

With the understanding that membership carries the obligation to abide by the Association's Constitution, By-laws and Code of Ethics, application is hereby made by the undersigned to be accepted as a Professional Associate Member of the Association with dues of \$25 per year. (please print)

Name _____

Address _____

Phone #'s _____

Guides License # _____

Name of Outfitter Employing me _____

Outfitter's Address _____

Outfitter's phone # _____

County of Residence _____

Legislative District (if known) _____

Date _____ Signature of applicant _____