Fishing has no boundaries®

LODGING REGISTRATION - 2026
FHNB- Brainerd Lakes Chapter
August 28th-29th, 2026Chapter

NAME _____ M/F: _____ AGE: _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE: _____(Circle one: Cell or Home) E-MAIL ADDRESS: _____

NAME OF ATTENDANT OR ANGLER(S) THAT NEED TO BE HOUSED WITH YOU:_____

_____

NAME OF PREFERED CABIN MATES:_____

_____

NAME OF PREFERED CABIN:_____

GROUP HOME NAME: _____

I WOULD LIKE LODGING FOR: FRIDAY ONLY_____ SATURDAY ONLY_____ BOTH NIGHTS_____

I AM AN: ANGLER_____ ATTENDANT_____ BOAT CAPTIAN (FREE)_____ FIRST MATE (FREE)_____

Fees for lodging is $24 per person per night. This includes attendants.

Checks for lodging will be separate from the Registration Check and need to be written out to Confidence Learning Center

Lodging cost is $24 per night, per person. This also pertains to the attendant/care provider. Please **DO NOT** send money for lodging until you have made a cabin reservation with Amynda Hadfield. Call Confidence Learning Center at 218-828-2344 for cabin reservations.

Call or write if you need financial assistance, as a limited number of scholarships are available.

RELEASE OF CLAIMS: In acceptance of my participation in the FHNB Fishing Event on August 28-29,2026, I release FHNB, Inc. and the FHNB Brainerd Lakes Chapter, the Confidence Learning Center, Rod Benders, Inc., Counties of Cass and Crow Wing, the City of East Gull Lake, all respective agents and employees and all others connected with the Event, from liability or claims for any injury to body or property or illness sustain during my participation in this Event. I understand this release applies to me, my heirs and anyone in participation with me. I am capable of participating in this Fishing Event for Individuals with Disabilities, recognize that risk of injury may accompany such participation, and acknowledge this release is being relied upon by this FHNB Chapter and FHNB, Inc. in permitting me to participate. I grant full permission to any and all related during the event to use any photographs, movies, recordings and other records of this event, without compensation.

Registration must be signed

SIGNATURE: _____ PRINT NAME: _____

DATE: _____

MAIL COMPLETED FORM TO:
FHNB - Confidence Learning Center
1620 Mary Fawcett Memorial Drive
East Gull Lake, MN 56401