

**SIMSBURY FISH & GAME CLUB  
STODDARD RESERVOIR REGULATIONS ACKNOWLEDGMENT**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ (h) \_\_\_\_\_ (c)

EMAIL \_\_\_\_\_

**I acknowledge receipt of the attached Stoddard Reservoir Fishing Regulations and understand that any infraction of these rules will result in loss of my fishing permit.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Please mail this signed acknowledgement to the Simsbury Recreation Department, PO Box 495, Simsbury, CT 06070. Upon payment of your permit and receipt of this signed form and a SELF-ADDRESSED STAMPED ENVELOPE we will mail your permit to you.**

**If you prefer to go in person to Simsbury Farms to register and pay, you may do so in the main building at 100 Old Farms Road, West Simsbury.**