ACA University Contact Roster

ACA Liaison/Interested Angler

First Name

Last Name

College

City/State

School email

Alt email

Phone Number

Current Year/Class

Additional Collegiate Anglers:

Submitting this information will allow ACA to add potential interested anglers to the ACA email distribution list for news, promotions, and events.

First Name	Last Name	School email	Alternate email	Boater (Y/N)