LAKE CASITAS RECREATION AREA

**MOONLIGHT FISHING REGULATIONS**

1. Park fees will be collected at the gate for vehicles and boats without annual decals.

2. A fee of $30.00 per vessel will be collected at the time of vessel inspection.

3. All boats will be inspected by Casitas Staff from 4:00 pm to 8:00 pm at the Lake Casitas front gate. Boats not inspected by 8 pm will not be allowed to participate.

4. Participants in Moonlight Fishing will be allowed to launch after inspection and before the lake has been cleared of all other traffic.

5. Night navigational lights must be on at 8 PM, and must remain on until leaving the lake.

6. Participants must wear life preservers with kill switch attached any time the large engine is running.

7. Maximum speed limit is **5 MPH**. after 8 PM until leaving the lake.

8. **Drugs and alcohol ARE PROHIBITED**.

9. All participants’ vehicles with, or without, a boat trailer shall display a special hang tag issued by Casitas Staff.

10. All boats must be off the water and on trailers by 11:00 PM.

11. Catch and Release will be strictly enforced. Bass and pan fish **MUST BE RELEASED** **immediately after capture**. Catfish may be taken.

In order to participate in the Moonlight Fishing Program, I understand that:

(a) I am responsible for knowing the rules and regulations governing the use of the Lake Casitas Recreation Area.

(b) I am responsible for the wake created by my boat and for any damage caused thereby.

(c) The Casitas Municipal Water District (“District”) shall not be held liable for any injury to any person or any damage to any property or loss arising out of my participation in the Moonlight Fishing Program and the use of the Recreation Area. I hereby indemnify the District, including, but not limited to, its officers, employees and management against any such liability.

(d) My permit to use the Recreation Area may be revoked for violation of any applicable rule or regulation.

I UNDERSTAND AND AGREE TO THE FOREGOING:

Sign\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Staff Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_