

Membership Application

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone # _____ E-Mail: _____

Boat Owner? YES _____ NO _____

Name of Boat: _____

Length: _____ Make: _____ Model: _____

Boat #: _____ Call Name: _____

Radio: CB: _____ VHF: _____

Applicant's signature: _____

Sponsor's Name: _____