



NEW MEMBER APPLICATION / INFORMATION

(Please Print)

1. Boat Captain

Name: _____

Address: _____

City: _____

Zip: _____

Contact Phone #: (____) _____ Alternate Phone # (____) _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Number: _(____) _____

Date: _____

2. Co Angler

Name: _____

Address: _____

City: _____

Zip: _____

Contact Phone #: (____) _____ Alternate Phone # (____) _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Number: _(____) _____

Date: _____

3. Alternate

Name: _____

Address: _____

City: _____

Zip: _____

Contact Phone #: (____) _____ Alternate Phone # (____) _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Number: (____) _____

Date: _____

I have read the by-laws and agree to adhere to them to include the release of liability of the club and all club officers / members in case of an accident.

Boat Captain Initial _____

Boat Captain Signature:

Co Angler Signature:

Alternate Signature:
