



Membership Application

MEMBER'S INFORMATION

Membership: <i>circle one</i> : NEW RENEWAL		<i>Circle one</i> : Adult Youth		Year:
Membership type: <i>circle one</i> Full CCBM/Pa B.A.S.S Nation (\$110); CCBM "B.A.S.S Social or Volunteer" (\$30); CCBM Youth(\$00)				
Name Last:		First:		MI:
Current address:				
City:		State:		ZIP Code:
FLW Number:		B.A.S.S Number:		
Cell number:		Home number:		
E-mail:				
Allergies or Medical Conditions:				
Committees you are willing to work on:				

EMERGENCY CONTACT

Name of Contact:
Phone number of contact:

BOAT INFORMATION

Make:	Model:	Length:
Make of Motor:	HP:	<i>Circle one</i> : Prop Jet
Boat Registration number:		
Boater Course <i>circle one</i> YES NO		Date of course:

BOAT INSURANCE INFORMATION (LIABILITY MINIMUM \$300,000 FOR PA B.A.S.S TOURAMENTS)

Insurance provider:			
Address:			
City:	State:	Zip code:	Telephone:
Policy #:	Liability Amount:	Dates of Coverage:	

NEW MEMBER'S SPONSOR

Current member's Name:

SIGNATURES

Renewal memberships do not require approval	
Signature of member:	Date:
Signature of President for approval of new member:	Date:
Signature of Secretary for approval of new member:	Date: