

WESTERN FISHBOAT OWNERS ASSOCIATION

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MEMBERSHIP APPLICATION: Retired / Crewmember

RETIRED _____, CREWMEMBER _____

NAME: _____

ADDRESS: _____

PHONE _____

E-MAIL _____

FORMER VESSEL/S: _____

Upon receiving this application you will become a non-voting member of WFOA. You will receive the newsletter and may attend WFOA meetings and conventions.

Please remit by check, money order, or credit card the annual membership fee of at least* \$25.00 to: WFOA, P.O. Box 992723, Redding, CA 96099

PLEASE ENCLOSE CHECK WITH APPLICATION FORM OR ENTER CREDIT CARD INFORMATION:

Credit Card # _____ Exp Date ____/____.

Name on card if different from above: _____

Address if different: _____

Visa _____, Mastercard _____ Sorry we do not take American Express

Amount: USD \$ _____.

Signature

Date

NOTE: If you become a vessel owner or operator you will have to upgrade to a regular membership category.

* Contributions of more than \$25.00 for WFOA and/or Public Education etc are always appreciated.

