Piedmont Saltwater Fishing Club Membership Application

Full name: Are you a licensed Captain with the USCG:		Spouse name:			
Street	City		State	Zip	
Port Address:					
Street	City		State	Zip	
Employer:					
Phone numbers:	Home: Mobile: Work: Home Port:				
E-mail address:					
Boat information:	Type: Length: Name:				
Sponsor (if any):	Name:				
ment fee of \$15.00 wi Junior Members (age	00 and must be paid prior to ll be required for renewing mes 10-18 and with a family bein it to the address below. The	nembership aft ing a member i	er the beginning in good standing the standing section in the standing section	g of the March meeting. g in PSFC) must comple	
	our membership fee you may Dakcrest Ave. Greensboro, N		heck payable to	PSFC and mail to:	
	ne promises herein provided, ities in the event of an injury of			C	icers of
Signature Rev.2016			Date		