## WESTERN BASS CLUB MEMBERSHIP APPLICATION **MEMBER INFORMATION** (ONLY NAME AND MEMBERSHIP NUMBER ARE NEEDED FOR RENEWAL OF MEMBERSHIP IF LAST YEAR'S INFORMATION IS CURRENT) Name: Membership number for Annual Renewal: Date of birth: Phone: Email: Current address: City: State: ZIP Code: **New Member** Membership Renewal Membership for the Year: Website screen name: (Please circle one) **SPOUSE INFORMATION** Name: Date of birth: Phone: Email: Website screen name: Joint Membership? Yes No (Please circle) 2<sup>ND</sup> EMERGENCY CONTACT OTHER THAN SPOUSE Name: Address: Phone: City: State: ZIP Code: Relationship: **BOAT INFORMATION FOR CLUB TOURMNAMENTS** Year: Manufacturer & Model: HP: WA State Hull Identification Number: Current \$300,000 liability insurance coverage for Issue Date: **Expiration Date:** boater. Insurance Company: Policy # Verified by: Washington State Boaters Education Card Boaters EC # Verified by: MAIN INTERESTS IN CLUB MEMBERSHIP (PLEASE CIRCLE OR WRITE IN ALL THAT APPLY) Conservation of fish and Lakes Cast for Kids - Wounded Warrior events Fishing Learning Experience Fish-in Events **Tournaments** Meet and Greet Events Other: CHILDREN AND DATE OF BIRTH IF MEMBERSHIP PRIVILEGES ARE DESIRED FOR THEM Name: DOB: Name: DOB: Name: DOB: DOB: Name: **SIGNATURES** By signing this application, you are acknowledging that there are inherent risks associated with boating and participating in fishing club events. You are hereby willfully releasing Western Bass Club of any liability associated with your participation in a Western Bass Club event. Any and all claims of injury or damage during a Western Bass Club event shall be your sole responsibility. Signature of applicant: Date: Signature of spouse (only if for a joint membership): Date: Membership Dues are \$60.00 per year and expire on Dec. 31st Dues Paid by (circle one) Cash or Check#\_\_\_\_\_ Received by\_\_\_\_ Membership #

Mail to:

Western Bass Club PO Box 201 Graham WA 98338