

Membership Application

Primary Active Member Information <i>Please print or type</i>			<input type="radio"/> Active 18+	<input type="radio"/> Apprentice (age 12-23)
Name (First, Middle, Last)			DOB	
Mailing Address			Gender	
Cell Phone	Home Phone	Spouse Name		
City, State, Zip			Spouse Name	
Email Address			Have you ever been a member of USPS/ABC? <input type="radio"/> YES <input type="radio"/> NO	
Personal Skills willing to share			SeaScout <input type="radio"/> YES <input type="radio"/> NO	
Do you own a boat? <input type="radio"/> YES <input type="radio"/> NO	Boat Length	Boat Name	Boat Type (Power, Sail, etc.)	

Additional Active Member(s) *(Primary and Others must live in the same household)*

Name (First, Middle, Last)	Cell Phone	Have you ever been a member of USPS/ABC? <input type="radio"/> YES <input type="radio"/> NO	DOB
Email Address	Personal Skills		Gender
Name (First, Middle, Last)	Cell Phone	Have you ever been a member of USPS/ABC? <input type="radio"/> YES <input type="radio"/> NO	DOB
Email Address	Personal Skills		Gender
Name (First, Middle, Last)	Cell Phone	Have you ever been a member of USPS/ABC? <input type="radio"/> YES <input type="radio"/> NO	DOB
Email Address	Personal Skills		Gender

Volunteer areas: Areas I/we are willing to help the squadron succeed *Please check all that apply*

Hospitality
 Membership
 Education
 Communications
 Photography
 Newsletter
 Public Relations
 Community Service
 Boating Activities
 Programs for Youth
 Other _____

Signature 1 _____ Signature 2 _____

Signature 3 _____ Signature 4 _____

Referred by _____ Date _____

*Please make check payable to BSPS for \$140.25 Family or \$93.50 Single, plus a one-time \$20 USPS processing fee
 Mail form and check to: Bellingham Sail and Power Squadron, P.O. Box 30363, Bellingham, WA 98228*