



MEMBERSHIP APPLICATION

B.A.S.S. Membership #		
Name		
Mailing Address		
City	State	Zip Code
Cell Phone	Home Phone	
Email		

Are you Federation member? Yes No

Do you own a boat? Yes No

Brand	Type	Motor/HP
-------	------	----------

Please provide us with a short explanation why you want to join us:

Signature: _____ Date: _____