

VIRGINIA BEACH ANGLER'S CLUB
MEMBERSHIP FORM (REVISED 10.1.19)

____ _
DATE JOINED VBAC

MEMBER _____
FIRST LAST

SPOUSE _____
FIRST LAST

CHILDREN UNDER 18

_____	_____
NAME	AGE
_____	_____
NAME	AGE
_____	_____
NAME	AGE

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE NUMBER _____

CELL PHONE NUMBER _____

E-MAIL ADDRESS _____

BOAT YES NO LENGTH ____ NAME _____

FISHING PREFERENCE SALT ____ FRESH ____ SURF ____ ALL ____

BEGINNER ____ NOVICE ____ EXPERIENCED ____

MEMBERSHIP (\$40.00) PAID _____

I AGREE TO HAVE MY NAME, SPOUSE'S NAME, HOME ADDRESS, HOME PHONE NUMBER, CELL PHONE NUMBER, E-MAIL ADDRESS AND BOAT NAME PUBLISHED IN A YEARLY MEMBERSHIP DIRECTORY (CROSS OUT AREAS YOU WOULD NOT LIKE TO SEE PUBLISHED). INFORMATION WILL NOT BE RELEASED TO COMMERCIAL ENTERPRISES. USE IS FOR INFORMAL CLUB COMMUNICATION ONLY.

(PRINT NAME) (SIGN NAME) (DATE)

BRING FORM TO MEETING OR MAIL TO VIRGINIA BEACH ANGLERS CLUB
P. O. BOX 8602
VIRGINIA BEACH, VA 23450