



CORPORATE MEMBERSHIP APPLICATION

South Shore Anglers

CORPORATE INFORMATION

CORPORATION NAME _____			PRIMARY CONTACT _____		
CORPORATE ADDRESS _____			WORK PHONE _____	CELL PHONE _____	
CITY _____	STATE _____	ZIP _____	EMAIL ADDRESS _____		
<input type="checkbox"/> YES <input type="checkbox"/> NO					

BOAT INFORMATION

Do you own your own boat?

MAKE _____	LENGTH _____
BOAT NAME _____	TYPE (Flats, Offshore, Cutty, Dinghy, etc.) _____

MEMBERSHIP INFORMATION

PRIMARY MEMBER'S NAME _____	SIGNATURE _____	DATE _____
ADDITIONAL MEMBER'S NAME _____	SIGNATURE _____	DATE _____
ADDITIONAL MEMBER'S NAME _____	SIGNATURE _____	DATE _____
ADDITIONAL MEMBER'S NAME _____	SIGNATURE _____	DATE _____

Please make checks payable to: South Shore Anglers Inc.
 Mail to: South Shore Anglers Inc., 12408 Midpointe Dr. Riverview, FL 33578
 Questions can be directed to: Tiger Hoffman, President, South Shore Anglers 813-629-2479

OBJECTIVES OF CLUB

- > Boater Safety
- > Inform Fisherman of Florida Fishing Laws and Regulations.
- > Keep Fisherman up to date on new fishing baits and equipment.
- > Camaraderie and Sportsmanship

ADMINISTRATIVE USE ONLY

<input type="checkbox"/> RENEWAL	<input type="checkbox"/> NEW MEMBERSHIP		
MEMBER DATABASE UPDATED _____	AMOUNT PAID _____	DATE _____	RECEIVED BY _____