



Membership Application

Angler Co-Angler

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Email Address _____

Telephone _____ Shirt Size _____ LBAA Member (Y or N) _____

Emergency Contact Information

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____

Boat Information

Boat Brand _____ Boat Model _____ Boat Year _____

Boat Color _____ Boat Registering State _____ Decal Number _____

Payment Type: PayPal friends and family womensbasstour@gmail.com

Questions? Contact Wendy at 225-445-6217 with any questions.

Membership Terms: \$50.00 for non LBAA Members. \$25.00 for LBAA Members Valid for one year

For official use only: Member # _____ Member Year _____ Member Since _____