

For AMSA use Only

Date Joined _____

AMSA #: _____

Assateague Mobile

Sportsfishermen's Association

7751 Dividing Creek Rd

Pocomoke, MD 21851

www.keepersofthebeach.com

Instructions: Please complete the following information and mail in the completed application with your check for \$35, made payable to AMSA. New memberships are approved at the monthly board meetings, held the 3rd Wednesday of every month. After you are approved for membership you will be mailed your tag & registration card.

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Age: _____ **Home Phone:** _____

Business Phone: _____ **Cell Phone:** _____

E-mail address: _____

How would you like to receive your quarterly newsletter E-mail, website, mail?

AFFIDAVIT

I will uphold the Code of Ethics of AMSA at all times.

New Member Signature: _____