

For Membership Secretary:

AMSA # \_\_\_\_\_

Date Joined: \_\_\_\_\_

## NEW MEMBERSHIP APPLICATION

Assateague Mobile Sportfishermen's Association

[www.keepersofthebeach.com](http://www.keepersofthebeach.com)

Instructions: Please complete the following information and mail in the completed application with your check for \$40, made payable to AMSA. New memberships are approved at the monthly board meetings, held the 3<sup>rd</sup> Wednesday of every month. After you are approved for membership you will be mailed your tag and registration card.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Age: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

All quarterly newsletters will be **emailed** to all current members and posted on the website. They will no longer be mailed. Please provide a current email address.

### AFFIDAVIT

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

New Member Signature: \_\_\_\_\_

Mail payment and application to:

Membership Secretary

PO Box 106

Berlin, MD 21811

### TAG OPTION for 2025:

☐

I would like the **Current AMSA Tag** with my membership.

☐

I would like the **New ABBA Tag** with my membership.

