

A.M.S.A. NEWSLETTER

October 2023

ASSATEAGUE MOBILE SPORTFISHERMEN'S ASSOCIATION, INC.

19th Annual A.M.S.A. Ronald Bounds Memorial Tournament Winners October 13 – 15, 2023

DMS Team #1



1st Place

Fish Hogs



2nd Place

One More Cast



3rd Place

One More Cast



Session 1 Winner

DMS Team #1



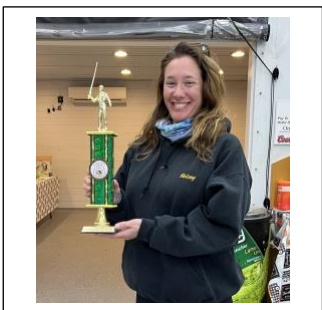
Session 2 Winner

Fish Hogs



Session 3 Winner

Kelsey Cycyk
Reel Women



Top Female – 12 points

Bob Dever
DMS Team #1



Top Male – 32 points

Jim Haug
DMS Team #1

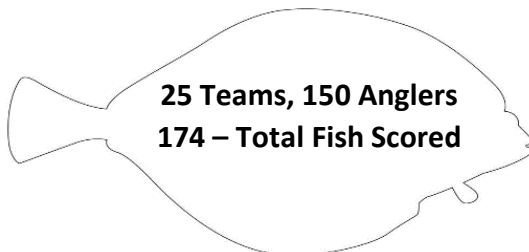


Largest Fish – 17" Flounder

THANK YOU!!!

To the teams and all the volunteers who helped make this event successful! Looking forward to next year!

I'D RATHER BE *Fishing*



AMSA Needs You:



It is election time again and AMSA needs you to get involved. We need members who are willing to get involved in the activities of the boardroom and other events. We strive to fight to keep our beach accessible to vehicle use. Each year the association elects officers and directors to take care of all the AMSA business. They also coordinate staff and run all the events and interests of the Club. Are you willing to become an officer or director and to serve the Club and represent the other members' interests on beach related topics? If so, please complete the interest form below. We need and encourage you to come and join us.

Mailed nominations must be received by: November 15, 2023. Nominations delivered in person will be accepted before the Board of Directors' meeting on November 15, 2023, before 7:30 p.m.

APPLICATION TO NOMINATION COMMITTEE FOR DIRECTOR OR OFFICER OF AMSA

I, as a member in good standing with Assateague Mobile Sportfishermen's Association (AMSA), do hereby submit my name as a nominee for the office of Director or Officer, for the year 2024. I understand the eligibility requirements as stated under Article IX and Article X under the AMSA bylaws.

Name _____

Address _____

Phone No. _____ AMSA Membership No. _____

Email _____

Check one: Director: _____

Officer: President: _____

Vice President: _____

Recording Secretary: _____

Corresponding Secretary: _____

Membership Secretary: _____

Treasurer: _____

Return to: AMSA
P.O. Box 106
Berlin, MD 21811

MUST BE RECEIVED BY NOVEMBER 15, 2023, OR HAND DELIVERED TO AMSA PROPERTY ON NOVEMBER 15, 2023, NO LATER THAN 7:30 P.M. BEFORE THE START OF THE BOARD OF DIRECTORS' MEETING.

MEMBERSHIP SECRETARY INFORMATION:

PLEASE mail all Membership Information to Membership Secretary, P.O. Box 106, Berlin, MD 21811. Questions can be directed to Lisa Morris at 410-430-9480 or lr Morris16@gmail.com.

LIFETIME MEMBERS – changes in information

Please remember to forward to the Membership Secretary any address changes and email changes.

P.O. Box 106
Berlin, MD. 21811

ANNUAL RENEWAL DUES AND NEW MEMBERSHIP DUES:

Please note, all membership dues will be increasing January 1, 2024. In order to pay your 2024 dues using the 2023 rates, your dues must be **received before** January 1, 2024.

	Effective Jan. 1, 2024	2023 Rates
Junior Membership Dues	\$17.50	\$12.50
Annual Renewal Dues	\$30.00	\$25.00
Senior Renewal Dues	\$15.00	\$12.50
New Membership Dues	\$40.00	\$35.00

2024 JUNIOR MEMBERSHIP REGISTRATION & RENEWAL

PLEASE USE A NEW FORM FOR EACH MEMBERSHIP NUMBER.

Forms may be mailed together with one check.

NEW Membership: _____ RENEWAL of Jr. Membership: _____

DUES - \$17.50 per child, Renewal each year.

NAME: _____ Jr. #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ DATE OF BIRTH: _____ AGE: _____ GENDER: _____

PARENT'S NAME: _____ AMSA #: _____

PARENT'S ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PARENT PHONE#: _____

AFFIDAVIT

I will uphold the Code of Ethics of AMSA at all times and abide by the Junior Members standard operating procedures.

Junior Member Signature: _____

Parent Signature: _____ Date: _____

Please Mail to: Membership Secretary, P.O. Box 106, Berlin, MD 21811



2024 AMSA MEMBERSHIP RENEWAL FORM

PLEASE USE A **SEPARATE FORM** FOR EACH MEMBERSHIP NUMBER. Forms may be mailed together with one check. **PAY DUES BY JAN. 31 2024 TO AVOID LATE FEE.** Thank you.

AMSA Tag No. _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

❖ ADDRESS CHANGE FROM LAST YEAR: _____ YES _____ NO

ALL FUTURE NEWSLETTERS WILL BE SENT BY EMAIL AND PLACED ON THE AMSA WEBSITE.

www.keepersofthebeach.com

PLEASE PROVIDE A CURRENT EMAIL ADDRESS.

EMAIL ADDRESS: _____

To replace your tag or get an extra tag, please submit \$30.00 per extra/replacement tag requested. Extra tags can only be ordered between December 1st and March 31st.

❖ # of Additional/Replacement Tags: _____

❖ Number of Stickers needed for tags you already have: _____

Annual Renewal Dues \$30.00 \$ _____

Senior Membership \$15.00 \$ _____
(age 62 & older)

Replacement/Additional \$30.00 each \$ _____
Tag Fee

Late Fee – After Jan. 31 \$15.00 \$ _____

TOTAL ENCLOSED: \$ _____

MAIL TO:

AMSA Membership Secretary

PO Box 106

Berlin, MD 21811

410-430-9480

Include check for correct amount made to AMSA, place membership number on check and enclose with this form.

NOTE – As of 2019 – we will no longer have an annual AMSA Handbook. Event information and newsletters will be posted on the AMSA website and emailed. Please be sure to provide a current email address so you do not miss any information.

Information Update Request

2024 AMSA LIFETIME MEMBERSHIP UPDATE FORM

Do we have your correct information on file?? We are asking all Lifetime members to update their information so we have correct records. Please fill form in COMPLETELY so we can update our records. - Thank you for your time.

Please print clearly.

AMSA Tag No. _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

**ALL FUTURE NEWSLETTERS WILL BE SENT BY EMAIL AND PLACED ON THE
AMSA WEBSITE. www.keepersofthebeach.com
PLEASE PROVIDE A CURRENT EMAIL ADDRESS.**

EMAIL ADDRESS: _____

MAIL TO:
AMSA Membership Secretary
PO Box 106
Berlin, MD 21811
410-430-9480

For Membership Secretary: AMSA # _____ Date Joined: _____

NEW MEMBERSHIP APPLICATION

Assateague Mobile Sportfishermen’s Association

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 3rd 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 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