



**Membership Application Form**  
 Or Join on-line at [www.uscanoe.com](http://www.uscanoe.com)

Date \_\_\_\_\_

Name of Organization \_\_\_\_\_

Enter the name of organization **only** if you join as: **(Race Sponsor, Club Affiliate, or Business Affiliate)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Address \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender M  F

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country (Non US) \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Membership:** Renewal  New  If new, recruited by: \_\_\_\_\_

**Member Type:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Governing (18 & Over) \$20.00 | <input type="checkbox"/> Family \$25.00       | <input type="checkbox"/> Junior \$7.50              |
| <input type="checkbox"/> Club Affiliate * \$30.00      | <input type="checkbox"/> Race Sponsor \$30.00 | <input type="checkbox"/> Business Affiliate \$30.00 |

- **Please attach your Club Membership roster with this application.**

**Foreign (US funds only) Canada/Mexico: Add \$5.00; All others add \$10.00**

**For family membership – other than above member, please complete the following:**

*(Family includes spouse and unmarried children under 19 years of age as of January 1, residing within the same household.)*

Name:

Date of Birth:

Gender

_____	_____	M	<input type="checkbox"/>	F	<input type="checkbox"/>
_____	_____	M	<input type="checkbox"/>	F	<input type="checkbox"/>
_____	_____	M	<input type="checkbox"/>	F	<input type="checkbox"/>
_____	_____	M	<input type="checkbox"/>	F	<input type="checkbox"/>
_____	_____	M	<input type="checkbox"/>	F	<input type="checkbox"/>

Amount Enclosed: \$ \_\_\_\_\_ **Send payment and membership form to:**

Make check payable to:  
**USCA**

Lynne McDuffie, USCA Membership Chair  
 410 Cockman Rd  
 Robbins, NC 27325  
 Phone: (910) 948-3238  
 Email: [llmcduffie@gmail.com](mailto:llmcduffie@gmail.com)

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