



NPSA

Application for Membership

Application # _____
Date Issued ___/___/___
Date Rec'd ___/___/___

I hereby recommend for consideration as a ___Regular___ Associate Member
To the best of my/our knowledge the below named complies with all the present
Requirements for membership and will be an asset to the Association if accepted.

Sponsoring Members:

1 _____ 2 _____

Name _____

Address _____

City _____ State _____ Zip _____ Email Address _____

Home Phone _____ Cell Phone _____

Are you now or have you ever been a member of another fishing club? _____

If so which one? _____

Will your work or place of residence prevent you from attending the required eight monthly
meetings? _____ If so please explain _____

Do you own a boat? _____

What do you like to fish for? Species _____

Where do you Fish? _____

Signature _____ Date _____

Applications are considered according to the date received by the membership committee. All applications must be announced one meeting prior to voting by NPSFA membership and published in the monthly newsletter. The applicant will be notified of the voting result. The applicant shall be refunded any and all dues or fees paid in advance if the application is rejected.

To be completed by NPSFA Membership chairman

Date Announced _____

Date Voted in _____

Accepted

Rejected

Amount Received _____

Date _____

Comments _____

Membership Chairman's Signature _____ Date _____