

The Western New York Offshore Powerboat Association Inc.



MEMBERSHIP APPLICATION

(Please print clearly)

NAME: _____ WIFE/GIRLFRIEND: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TEL (____) DAY: _____ EVENING _____ CELL: _____

E-Mail: _____ Do you want to receive the newsletter via E-mail? []

RENEWAL: ____ NEW MEMBER: ____

\$30.00 (U.S. Funds)

R.O.P.A. MEMBERSHIP ADD \$5.00 (YES/NO): _____

DATE: _____ CASH \$ _____ CHECK\$: _____

Do you own a boat : _____ (Yes/No?)

BOAT INFORMATION

YEAR: _____ MAKE: _____ MODEL: _____ LENGTH: _____

NAME: _____ REGISTRATION NUMBER: _____

COMMENTS/SUGGESTIONS:

Please list on the back of this application:

- Any surplus boating accessories/parts you wish to sell
- List your talent or specialty if interested in helping members with their problems: Ex. carburetors, motors, electrical, drives, etc.

Please return this application with payment to the next meeting or mail to:

Mike Wright
WNYOPA
7016 Tracy Court
Lockport, NY
14094, USA

The Western New York Offshore Powerboat Association Inc.