

Lake Monroe Sailing Association

Membership Application

Please, completely as possible, fill out this form and email to: fla.lmsa@gmail.com or Return it to an officer or Mail to address listed below.	Name				
	Address				
		City:	St:	Zip:	
	Phone	Hm	Wk:	Cell:	
	Email				
Sailing Vessel Information					
Do you presently own a boat?				YES	NO
If YES - Boat Type:		Model:	Length:		
Keel Type:	Draft:	Mast Rig Type:			
Boat Name:		Sail Number:			
Sail Inventory:					
Optional Information					
Occupation					
Name of Spouse, Family Member(s) or Partner					
SAILING EXPERIENCE AND CREW INFORMATION					
What type of sailing experience do you have?					
What type of sailing experience are you looking to develop?					
Are you looking to crew for someone?					
As boat owner, do you need additional crew?					
OTHER INFORMATION					
My sailing interest are primarily (circle choices): Racing Cruising Both					
I would like to participate in (circle choices): Races/Regattas Cruises Regatta Planning Officership Seminars Community Events Social Events Newsletter/Web Site Maint.					
What would you most like to achieve from your LMSA membership?					
DUES (check one)					
	Annual Membership Fee			\$100.00	
	Annual Associate Fee			\$ 50.00	

Referred to Lake Monroe Sailing Association by: _____

Each full membership is good for one individual, one vote, and one copy of the newsletter. Dues are to be paid annually, renewable on January 1st of each year.
 Mail dues to: LMSA, P.O. Box 297, Sanford, FL 32771

Applicant's Signature: _____ Date: _____