



Recreational Boating Association of Washington

Individual Membership Form New Applications

Date: _____

Name: _____
(Last Name) (First Name) (Middle Initial)

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email: (Required) _____

In order to reduce costs, email addresses are requested for all electronic RBAW communications (newsletters, etc.). Email addresses are never shared or sold to third parties per RBAW policy.

Boating Club Affiliation (if any) _____

Boat Length? _____ Power? _____ Sail? _____

MEMBERSHIP DUES (Annual) \$20.00

Additional Lobbyist Contribution (optional) \$ _____

TOTAL AMOUNT \$ _____

COMMENTS INVITED: _____

Mail to:
Jan Gould, RBAW Treasurer
P.O. Box 17063
Seattle, WA 98127

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