

Bay Area Canoe & Kayak Fishing Club

MEMBERSHIP RENEWAL FORM

Date: ___/___/___

Name: _____ Forum Screen Name: _____

Address: _____

City: _____ State: ___ Zip: _____

E-mail (please print clearly): _____

Cell phone: _____ Home phone: _____

Dues are paid annually and are due March 1.

Please select one option:

- **Individual Membership --- \$30.00**
- **Family Membership ----- \$40.00**

Additional Family Members

Spouse _____

Child _____ **Child** _____

Make checks payable to BACK & mail along with the signed and dated waiver to:

BACK

5941 42nd Ave. No.

St. Petersburg, FL 33709

For BACK records only. Expiration date: ___/___/___