

# NATIONAL JET BOAT ASSOCIATION

## MEMBERSHIP FORM 2007

---

---

- \$150.00 Annual Fee (single)
- \$155.00 Husband and wife
- \$100.00 River Racer
- \$100.00 Last two races of the year

Name \_\_\_\_\_ Birth date \_\_\_\_\_

Spouse *(only if joining)* \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Occupation \_\_\_\_\_

Boat Name \_\_\_\_\_ Boat Number \_\_\_\_\_

(To retain your boat number, you must join by the second race)

(Check appropriate box)

Renewal or  New Member

Signature \_\_\_\_\_ Date \_\_\_\_\_

Send to:

**NJBA Membership**  
Roger Roadstrom  
6301 Myrtle Beach  
Sun Lakes Country Club, CA 92220

**Be sure to complete the emergency information form on the next page**

# EMERGENCY INFORMATION

Boat # \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Mi \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Allergies: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

\_\_\_\_\_

## EMERGENCY CONTACT LIST

(First Choice)

Last Name \_\_\_\_\_ First \_\_\_\_\_ Mi \_\_\_\_\_

Relationship \_\_\_\_\_ Ph. # \_\_\_\_\_ Alt. ph. # \_\_\_\_\_

(Second Choice)

Last Name \_\_\_\_\_ First \_\_\_\_\_ Mi \_\_\_\_\_

Relationship \_\_\_\_\_ Ph. # \_\_\_\_\_ Alt. ph. # \_\_\_\_\_

## INSURANCE INFORMATION

Ins. Co. \_\_\_\_\_ Insurance Agent \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Policy No. \_\_\_\_\_

Doctor \_\_\_\_\_

Ph. # \_\_\_\_\_ Alt. ph. # \_\_\_\_\_