

**WESTERN FISHBOAT OWNERS ASSOCIATION**  
**SUPPORTING MEMBERSHIP APPLICATION**  
(FOR FISHING-RELATED BUSINESSES, SUPPORT INDUSTRIES,  
INTERESTED INDIVIDUALS, ETC.)

BUSINESS NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE: (     ) \_\_\_\_\_

E-MAIL: \_\_\_\_\_ WEBSITE: <http://www.> \_\_\_\_\_

NATURE OF BUSINESS: \_\_\_\_\_

RECREATIONAL VESSEL: YES  \$ 100.00

I hereby apply for Supporting Membership in Western Fishboat Owners Association. I understand that this membership has restrictions. I further understand that, should the cooperative ever declare a dividend or dissolve, I will not be eligible to receive any funds as a Supporting Member.

S-I	(Supporting)	\$100.00
AS-I	(Associate Supporting)	\$250.00
AS-II	(Premier Supporting)	\$500.00
AS-III,SP	(Special Recognition)	\$1,000.00

All \$100.00 memberships will receive newsletter and are entitled to place one flyer per year within a newsletter advertising their business or service. All other rates will receive additional benefits. (see attached letter for details)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE ENCLOSE CHECK WITH APPLICATION FORM OR ENTER CREDIT CARD INFORMATION:**

Visa\_\_\_\_, Mastercard\_\_\_\_ American Express\_\_\_\_

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_/\_\_\_\_.

Name on card: \_\_\_\_\_ Card Code \_\_\_\_\_

Address: \_\_\_\_\_

**Amount USD \$** \_\_\_\_\_.

**I wish to receive newsletter by:** Email as PDF , Via Snail Mail

P.O. Box 992723  
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wfoa-tuna.org

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Fax: 530-229-0973  
PacificAlbacore.com