

DATE: _____

FORT POLK COMMUNITY



BASSMASTERS



MEMBERSHIP FORM

Fort Polk Community Bassmasters Membership Form

Name:

Address:

City:

State:

Zip Code:

Email address:

Home Number:

Work Number:

Cell Number:

In Case of Emergency Call (Name):

Telephone Number:

Spouse Name:

B.A.S.S. Exp. Date:

B.A.S.S.#

Club Dues / Options

Club Dues

\$40.00

Date Paid:

Big Bass

(Optional)

\$20.00

Date Paid:

State Federation

(Optional)

\$30.00

Date Paid:

National Federation

(Optional)

\$30.00

Date Paid:

ALBC

(Optional)

\$35.00

Date Paid: