

The Connecticut Charter and Party Boat Association, Inc.

Application for Membership

(Please Print Clearly)

Date ____/____/____

I hereby apply for membership in the Connecticut Charter and Party Boat Association.

Name _____ Street Address _____

City _____ State ____ Zip _____ Phone H (____) _____ C (____) _____

E-Mail address _____ Website _____

Vessel Information:

Do you own a Vessel? ___Yes ___No If yes, what size? _____ Gross Tonnage (If applicable) _____

Vessel Name _____ Port _____ Business Name _____ Phone (____) _____

Make of Vessel _____ Where Built _____

Is Vessel Coastwise Documented? ___Yes ___No. If yes, Documentation Number _____

Does the Vessel have a Connecticut Charter/Party Boat License? ___Yes ___No

Coast Guard License # _____ Date of Issue ____/____/____ Port of Issue _____ Type _____

Enrolled in a Random Drug Testing Program? ___Yes ___No Do you have a TWIC? ___Yes ___No

Recommended by _____ Type of Membership ___Full \$100.00 ___Associate \$50.00

Application Fee \$100.00 Total enclosed \$ _____

Make Check Payable to the Connecticut Charter and Party Boat Association.

Applicant's Signature _____

To be completed by the Connecticut Charter and Party Boat Association.

Membership Approval ___Yes ___No Total Received \$ _____ Date ____/____/____

Secretary Notified ___Yes ___No

Signature _____