

Palm Beach County Airboat and Halftrack Conservation Club, Inc.
P.O. Box 17038
West Palm Beach, FL 33416-7038
www.pbcairboatclub.com



Application for Membership Year: **20**_____

Membership Fee (Check One)

- | | |
|---|--|
| <input type="checkbox"/> Renewal Membership | <input type="checkbox"/> \$25.00 – Single Membership (Yearly) |
| <input type="checkbox"/> New Membership | <input type="checkbox"/> \$40.00 – Family Membership (Yearly) |
| <input type="checkbox"/> Life Membership (Information Only) | <input type="checkbox"/> \$500.00 – Life Membership (one time fee) |

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone #(_____) _____ - _____ Cell Phone #(_____) _____ - _____ Other #(_____) _____ - _____

Email Address _____

If you have a Family Membership please list their names and birth dates of each family member.

| | |
|---------------|-------------------------------|
| Self: _____ | Date of Birth: ____/____/____ |
| Spouse: _____ | Date of Birth: ____/____/____ |
| Child: _____ | Date of Birth: ____/____/____ |
| Child: _____ | Date of Birth: ____/____/____ |
| Child: _____ | Date of Birth: ____/____/____ |

Resident of Palm Beach County: Yes / No

Occupation: _____ Employer: _____

Type of Hunting vehicle(s) you own: _____

Would you like to be part the Emergency Response Team: Yes / No
 If yes, do you own: Airboat Buggy Motorhome/Camper Other: _____

Recommended by: _____
 (Member of the Airboat & Halftrack Club)

I shall abide by all the laws of the Palm Beach County Airboat & Halftrack Conservation Club, Inc.

 Signature of Applicant Date ____/____/____

Note: You do not have to own an Airboat, Track or Swamp Buggy to be a member of this club. Information provided here is used for business purposes only. The Palm Beach County Airboat & Halftrack Conservation Club Inc. is a 501(c)(3), tax-exempt, non-profit corporation. Contributions are tax-deductible to the extent allowed by law.

For Club Use ONLY

Submitted to the Board: ____/____/____ Approved () Denied () _____
 Secretary's Signature

Applicant Notified: ____/____/____ Card Issued: ____/____/____

Application Fee Received: ____/____/____ Amount: \$_____. Cash Check # _____ Credit Card