



LAKE ERIE CHARTER BOAT ASSOCIATION Application for Membership

_____ **ACTIVE--\$85:** Must be a licensed Ohio Guide. May attend any Board meeting and bring forth or present issues. May also chair or serve on committees.

Guide License number

_____ **AFFILIATE--\$35:** Must be a Licensed Ohio Guide and a dues paying member of another charter organization.

(Name of other organization)

_____ **SPORTSMAN--\$35:** Any interested person who believes in the stated goals of the LECBA and wishes to support us in our many causes. A **first mate** is to be registered as a sportsman and **must** have a current drug card.

_____ **BUSINESS-- \$60:** Have all LECBA benefits except may not vote for officers. It is a goal of the LECBA to work with and support our business members.

_____ **ORGANIZATION--\$75:** Must be a member of another Charter or Sport fishing group.

Name: _____

Address: _____

City, State, Zip: _____

Primary Phone: _____ (Circle one: cell / home)

Boat Name /Marina _____

Email address : _____

Yes / No: Request for information on the LECBA Drug Consortium

Please **print clearly** and make all checks payable to **LECBA** and submit to:
Kelly Collins 735 Timber Lane, Port Clinton, OH 43452