



support your local fishermen

WEfish MEMBERSHIP APPLICATION & MEMBERSHIP RENEWAL FORM

*New Membership [] Membership Renewal []

*new memberships: Please fill out all information below. Renewals please fill out Name, and update any other information before filing out membership below. Please note membership options have changed. See below.

Your Name: _____

Spouse/partner Name: _____

Boat Name & Size (optional): _____

Port of Registration (Optional): _____

Fishery Affiliation & How long (optional): _____

Mailing Address: _____

City, State, Zip: _____

Cell Phone: () _____ Home phone: () _____

Email Address: _____

I would like to receive my newsletter via email []

Annual Membership Rates (Full calendar year):

- Active Membership (volunteer >5 hrs.):
 - Individual/family Membership \$50 \$ _____
 - Supportive Membership:
 - Individual/family Membership \$75 \$ _____
 - Business Membership \$100 \$ _____
 - Corporate Membership \$500 \$ _____
 - Additional Donation to help Wefish with Marketing and advertising \$ _____
 - Wefish Scholarship Donation \$ _____
- Name listed on Scholarship _____

Total Enclosed: \$ _____

Please complete this form and return it with your check payable to Wefish & mail to PO box 2467, Westport, WA