

SURFARI NEW MEMBERSHIP FORM - MISSION STATEMENT: TO PROMOTE SURFING AS A HEALTHY AND FUN SPORT FOR ALL AGES

SELECT TYPE OF ANNUAL MEMBERSHIP: DATE:
\$50.000 INDIVIDUAL MEMBERSHIP CASH CHECK CREDIT CARD
*Calendar year membership. Members joining in 4th quarter will carry over for the full subsequent year PLEASE PRINT! NAME(s):
EMAIL ADDRESS(es):
CELL/HOME PHONE(s):
MAILING ADDRESS:
NUMBER OF YEARS SURFING: NOMINATED BY:
FAVORITE SURF SPOT(s):
WHAT SURFBOARDS TO YOU OWN?
PLEASE STATE YOUR REASONS FOR WANTING TO JOIN THE SMRYNA SURFARI CLUI AND WHAT YOU THINK YOU COULD CONTRIBUTE TO THE CLUB:

**Membership requirements per Surfari Articles of Incorporation: Every member shall be of the age of 18 years or older (unless children in a family membership), own <a href="mailto:attention: attention: attention: attention: by a member and seconded by a member. <a href="mailto:decorporation: attention: attention:

WE LOOK FORWARD TO HAVING <u>YOU</u> AS A MEMBER! SMYRNA SURFARI CLUB, INC.

Post Office Box 2362, New Smyrna Beach, FL 32170 info@smyrnasurfariclub.org

FOR CREDIT CARD PAYMENTS, USE THIS LINK OR OUR QR CODE: https://square.link/u/zTaLVskk

