

CAPE CORAL TARPON HUNTER'S CLUB

MEMBERSHIP APPLICATION

*Print, complete, and mail with payment to: Cape Coral Tarpon Hunter's Club  
1616 W.Cape Coral Pkwy, Ste 102  
Mail Box #130, Cape Coral, FL. 33914*

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Show name as you want it on roster

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ **PLEASE SEND EMAIL TO:  
6SWEATHOG@GMAIL.COM with "NEW MEMBER" in subject line  
informing that your application and payment are in the mail.**

Annual Dues: ( ) \$40.00 Single ( ) \$45.00 Family ( ) Check # \_\_\_\_\_ ( ) Cash

Family Memberships

Spouse Name: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

Dependent Children or Grandchildren Under 18 years of age on March 1

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

( ) Renewal ( ) New Member: How did you hear about club? \_\_\_\_\_  
\_\_\_\_\_

Boat Name: \_\_\_\_\_ Do you have a VHF Radio? \_\_\_\_\_

Sponsored by: \_\_\_\_\_

Board Approved Date: \_\_\_\_\_