

Make check payable to ACBS and mail check and application to:
ACBS International Headquarters, ATTN: Membership, 422 James Street, Clayton, NY 13624

Membership Application

NAME _____

E-Mail Address _____

SPOUSE _____

Address _____

City _____ State/ Prov _____ Zip _____

Phone: Day _____ Evening _____ Cell _____

Dues Schedule: International (select one)

Type of Membership	Dues	Enter Amount*:
Annual (AN)	\$45.00	_____
Junior (JN)	\$15.00	_____
Life Membership	\$750.00	_____
**Associate (AS)	\$100.00	_____

Local Chapter Preference:

Heartland Classics \$25.00

_____ \$25.00 _____

Total Dues:

*(All amounts in US funds unless otherwise noted.**Includes listing in the Directory by business name)

Boat Information:

BOAT #1

Year _____ Builder _____ Model _____

Length Overall _____ Hull # _____ HP _____

Engine Make _____ # Cyl _____

BOAT #2

Year _____ Builder _____ Model _____

Length Overall _____ Hull # _____ HP _____

Engine Make _____ # Cyl _____

List information about additional boats on the back of this form.