

MASS LOBSTERMEN'S ASSOCIATION, INC.
8 OTIS PLACE
SCITUATE, MA 02066-1323

BUS. 781-545-6984
FAX. 781-545-7837
Website: www.lobstermen.com

MEMBERSHIP APPLICATION

Section I TYPE OF MEMBERSHIP (Check One)

- \$100.00 Annual Dues Regular * (Voting) \$100.00 Annual Dues Associate (Non-Voting)
 \$ 50.00 Supporting Member (A) \$ 25.00 Supporting Member (B)

*To qualify for a Regular Voting Membership, you MUST (1) hold a valid Mass. Commercial Lobster License, (2) reside in Massachusetts, (3) be sponsored by either two Regular Members or one Delegate, and (4) send in a copy of your lobster license with this application.

Sponsors:

#1 Name _____ [] Delegate [] Regular Member

#2 Name _____ [] Delegate [] Regular Member

Section II MEMBERSHIP INFORMATION Previous MLA Member? [] Yes, When _____ [] No

Full Name _____

Company Name (if any) _____

Address _____

City/Town _____ State _____ Zip Code _____

Home Phone _____ Bus Phone _____ Cell Phone _____ Fax Number _____

Email Address _____ Website _____

MLA Death Beneficiary Name _____ Relationship _____ Address (if different) _____

Vessel Name _____ Home Port _____

[] Check here if you would like Hull and P&I Insurance information sent to you

Permit Number _____ Type of Permit (fishery, etc) _____

Lobster Price Catch Market Report (distributed weekly & available to MLA Members Only)

Mail or Fax Price: [] 26 Wks (\$15) [] 52 Wks (\$30) Fax # _____

Free to \$100 members via email

How would you like to pay? [] Check (payable to MLA) [] MasterCard [] Visa

Credit Card Number _____ Exp. Date _____

Signature _____ **Date:** _____ / _____ / _____