HBTS FISHING CLUB
*MEMBERSHIP APPLICATION

Date _____

Name _____

Address _____

DOB _____

Email Address _____

Phone Number _____

I certify that I am a HBTS Property Owner: Yes ☐
No ☐

The best description of my fishing experience is:

Never Fished ☐
Beginner ☐
Some Experience ☐
Expert ☐

I own a boat Yes ☐ No ☐

My interests in fishing are:

Fresh Water Fishing ☐
Salt Water Fishing ☐
Surf Fishing ☐
Dock Fishing ☐
Fly Fishing ☐
Other

Signature _____

*The information on this form is for the sole use of the HBTS Fishing Club and not to be used for any other purposes.

Submit Form

For Club use only:

Application Received:

Application Approved:

HBTS Membership Card Issued:

Dues Paid: