



PASA MEMBERSHIP APPLICATION

PASA membership runs from January 1 through December 31 each year. Member dues are \$25 per year. Children 16 years old and younger do not need to be a member to fish. Anyone under 18 must be accompanied by an adult 18 years or older. Dues can be paid anytime after Jan. 1 of each year. Dues can be mailed or paid at the first tournament in which you participate. To mail dues, print, complete this form and mail with payment to:

PASA 144 Prospect St., Waymart, PA 18472

Date of Application: _____ Membership For: 20 _____

Name: _____ New _____ Renewal _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ SSN: _____

Email: _____

PASA is required by the IRS to provide 1099 forms each year to all members who earn over \$600 in winnings in PASA events. Therefore social security numbers are required. All member information is kept confidential and is not used by, or sold to, any outside organizations or entities.

I have completed the application and enclosed \$25 dollars payable to PASA. I hereby agree to be bound and comply with all of PASA's rules and regulations, bylaws and tournament rules. I assume all risks associated with PASA tournaments and hereby release PASA, the host, sponsors, officers/directors of PASA, and any other person or entity involved on behalf of PASA from all claims, injury, and/or damages incurred in connection with any PASA tournament or other PASA sponsored event. I agree and acknowledge that I will carry a minimum of \$100,000 liability insurance on the boat that I will use in PASA events. I understand that PASA has the right to reject any application for any reason and upon such rejection shall refund any membership dues paid for the year in which the rejection occurred.

Applicant signature: _____ Date: _____

Date received: _____ Date approved: _____ PASA Official: _____