



## Membership Application Form

[www.coastaltrollersassociation.com](http://www.coastaltrollersassociation.com)

### Mission Statement:

The Coastal Trollers Association works to enhance and protect an economically viable Washington troll fishery.

Member Name: _____	
Boat Name: _____	Boat Size: _____
Mailing Address: _____	
City: _____	State: _____ Zip: _____
Phone: (    ) _____	Cell: (    ) _____
Email: _____	
Troll Licenses (check all that apply)	
WA <input type="checkbox"/>	OR <input type="checkbox"/> CA <input type="checkbox"/> AK <input type="checkbox"/> Tuna <input type="checkbox"/>
<b>Please select a membership type:</b>	
<input type="checkbox"/>	Washington Troll License Holders \$ 150
<input type="checkbox"/>	Associate Members - in the industry or lease a permit \$ 100
<input type="checkbox"/>	Business Members - see CTA's website for an application -----
<input type="checkbox"/>	Retired Members \$ 50
<input type="checkbox"/>	1% Season donation if not previously contributed _____
<input type="checkbox"/>	Donations specifically for the PMFC process costs _____
<input type="checkbox"/>	Donations specifically for promoting our product _____
<input type="checkbox"/>	Donations to cover general operating costs _____
<b>Annual dues based on anniversary date</b>	
	<b>Total</b> _____
Please mail your payment to:	
Coastal Trollers Association	
C/O Sharon and TK, Treasurers	
PO Box 8322	
Covington, WA 98042	