

Islamorada Charter Boat Association

Member Application

NAME: _____

BOAT NAME: _____

STREET: _____

CITY/ STATE/ ZIP: _____

TELEPHONE: _____

E-MAIL: _____

WEB ADDRESS: _____

DONATION / DUES \$50.00

CASH _____

CHECK _____

PAYABLE TO: I.C.B.A.

P.O. Box 462

Islamorada, Florida 33036

Your contribution is tax deductible. We are a 501(c)(3) not for profit organization.