



MEMBERSHIP APPLICATION

2002

For Office Use Only

1251 Holy Cow Road, Polk City, Florida 33868-8200
 Toll Free 800.533.2972 * Phone 863.324.4341 * Fax 863.325.8259 * E-mail: memberservices@usawaterski.org

PERSONAL INFORMATION

- New Membership Renewal
 Please assign a generic #

Social Security #: _____
 Full Name: _____
 Affiliated Club: _____
 E-Mail Address: _____
 Gender: Male Female
 Birth Date: _____ (mandatory)
 Occupation: _____
 Mailing Address: _____
 City/State/Zip+4: _____
 Home Phone: () _____
 Fax Number: () _____
 Work Phone: () _____ Ext. _____

IMPORTANT — PLEASE TYPE OR PRINT

MEMBERSHIP INFORMATION

Membership Number — Your Social Security number will be used as your permanent USA Water Ski membership number. If you prefer that USA Water Ski assign you a generic membership number, please check the appropriate box to the left.

Membership Types and Sport Disciplines — Before choosing a USA Water Ski membership type and sport discipline, carefully review the Membership Program Descriptions listed on the back of this application.

Sport Disciplines (mandatory)

- 3-Event - AWS Kneeboard – AKA
 Barefoot – ABC Show Ski – NSS
 Collegiate – NCW Ski Race – NWR
 Disabled – WSD Wakeboard – AWA

Active Memberships


- Individual Active \$ 50
 Collegiate Active (insurance only — see back) \$ 25
 Foreign Active (foreign resident) \$ 55
 Foreign Federation Active (insurance only) \$ 25
 Jr. Active (17 & under) \$ 35
 Family Head of Household Active \$ 55

Supporting Memberships

- Individual Supporting \$ 25
 Foreign Supporting (foreign resident) \$ 30
 Family Head of Household Supporting \$ 40

Individual/Head of Household Amount \$

FAMILY MEMBERSHIP INFORMATION

	Spouse/Dependents' Full Names <i>(children age 17 & under)</i>	Social Security #	Gender <i>(circle choice)</i>	Birth Date <i>(mandatory)</i>	Sport Disc. <i>(mandatory)</i>	Membership Type	Fee
Spouse		<input type="checkbox"/> Assign	<input type="checkbox"/> Male <input type="checkbox"/> Female			<input type="checkbox"/> Active \$25 <input type="checkbox"/> Supporting \$ 0	
Child		<input type="checkbox"/> Assign	<input type="checkbox"/> Male <input type="checkbox"/> Female			<input type="checkbox"/> Active \$25 <input type="checkbox"/> Supporting \$ 0	
Child		<input type="checkbox"/> Assign	<input type="checkbox"/> Male <input type="checkbox"/> Female			<input type="checkbox"/> Active \$25 <input type="checkbox"/> Supporting \$ 0	
Child		<input type="checkbox"/> Assign	<input type="checkbox"/> Male <input type="checkbox"/> Female			<input type="checkbox"/> Active \$25 <input type="checkbox"/> Supporting \$ 0	
Child		<input type="checkbox"/> Assign	<input type="checkbox"/> Male <input type="checkbox"/> Female			<input type="checkbox"/> Active \$25 <input type="checkbox"/> Supporting \$ 0	

Spouse/Dependent(s) Total \$

Total # Shirts and/or Hats _____ x \$25 \$

Total Amount Due \$

*** **SUPPORT YOUR U.S. WATER SKI TEAMS** ***
 Donate \$25 and receive an official 2001 U.S. Water Ski Teams T-Shirt or Hat
 # Hat(s) _____ + # Large T-Shirt(s) _____ + # Extra Large T-Shirt(s) _____

PAYMENT INFORMATION

Payment Method Check/Money Order (payable to USA Water Ski) MasterCard Visa
 Credit Card # _____ Expiration Date _____ Last 4 Digits of SS # _____
 Cardholder's Billing Address _____ Billing Zip Code _____ Auth. # _____
 Cardholder's Printed Name _____ Signature _____

