

## **Marion County Aquaholics** Paddlers Group, Inc.

## Membership Application

Individual -	\$10.00; Family -	\$15.00 per year	
Date:			
Members Name:		DOB:	
Address:			
City:	State:	Zip:	
Telephone:	Work:	Cell:	
Additional Members (if fami	,	n the same household) DB:	
	10 N C DO	//	
D. P		DB: A	
E-Mail Address:	DC	DB:	
L-Mail Address.			
May we list your name/phone in our member roster only? Y / N Emergency Contact: Phone:			
Do you own a canoe or kayak: Y / N?			
Paddling experience: How did you hear about us			
Please fill out a	pplication, bring it to a Marion County Aquah P.O. Box 6583 Ocala, FL 34478		
Monthly meetings, ur of the month at the Sheriff' south of Ocala) at 7 pm.	nless otherwise announ s Substation on SR-441	ced, are held the 3 <sup>rd</sup> Wednesday L/SE 80 <sup>th</sup> Street, Santos, FL (just	
use is a privilege, and that County Aquaholics Paddlers coordinators are in no way	I do so at my own risk Group, Inc. its membe liable for any injury, ac	ted States are wilderness and its and with good judgment. Marion ers, officers or individual trip cident or illness that I may arion County Aquaholics Paddlers	
Signature:		Date:	