

National Jet Boat Association

Membership Application 2025

	Owner/Driver \$		\$275 Owner \$275 Driv		ver \$275		
	Spouse \$5	General I	General Membership \$275		Last 2 Races of the year \$175		
Name			Birth c	late	Ag	e	
Address		2	14/	\Box			
City		1	State	× Y	Zip		
Home Phone		Cell		w	ork		
Email address					- (
Occupation				<u>الا</u>	_7	<u></u>	
Boat name		•/	Boa	t number	mber, you must	ioin March 1st)	
Hull type: □ Hydro Email or Send to:	o	Scot Till 8863 For rangevale, Em	it Board M inghast tuna Wy. , CA 95662 ail paracing.net	lfg	mber, you must		
Signature				_Date			

Be sure to complete the emergency information form on the next page

EMERGENCY INFORMATION

	Boat #					
Last name	First	First name		MI		
Address						
City		State	Zip			
Home Phone	Cell		Work			
Allergies:						
Medical conditions:		01	0			
EN	<mark>IERG</mark> ENCY CO	ONTACT	LIST			
(1 st choice) Last name	First	t name	/	MI		
Relationship	Ph#		_Alt. Ph	ŏĿ		
(2 nd choice) Last name	Firs	st name		MI		
Relationship	Ph#	1	_Alt. Ph	2		
I	ISURANCE IN	FORMAT	ION			
Policy no:	JET					
Insurance Co.	Insuran	ce Agent				
Address						
City		State	Zip			
Insurance co. ph. #		Cell				
Doctor:						
Ph. #		Alt. ph. #				