

DELMARVA FISHERIES ASSOCIATION, INC.

MEMBERSHIP APPLICATION FORM

MEMBER INFORMATION							
Member Name:							
Member Address:							
Phone	Email		Website				
RECOMMENDED FOR MEMEBRSHIP	BY:						
	PRIMARY CONTACT(S), TITLE(S) AND	EMAIL ADDRESS				
1. Name:		2. Name:					
Title:	Title:	Title:					
E-mail Address:		E-mail A	E-mail Address:				
3. Name:	4. Name:	4. Name:					
Title:	Title:	Title:					
E-mail Address:	E-mail A	E-mail Address:					
Special recognition at DFA ever qualify to receive DFA publicar Association Member - \$1,750 (Associations comprised of content person and 3 other deassociation to a 50% discount Allied Business Member - \$75 (Restaurants, marinas, boat business logo displayed on DF receive DFA publications and a Supporting Member - \$100 (Individuals who support the DES)	wholesalers, packers, distributors, markents and workshops; corporate logo dispitions and related information, including mmercial watermen, fishermen, seafood esignees qualify to receive DFA publication DFA "Supporting Member" dues; and	eters) layed on DFA's we email updates; and harvesters; allied in the late of the late	bsite with a link to your website d 10 colorful DFA logo decals. business and trade associations. ormation, including email update decals. vices, transportation/fuel, electrevents and workshops; contact I DFA logo decals.	; contact person and 3 other designees) res; qualifies individual members of your onics, lodging)			
PAYMENT INFORMATION							
Check (payable to Deli	marva Fisheries Association)		Cash	Credit Card			
Card Type: Card	d Number:		Security Code:	Expiration Date:			
Name on Card:	on Card: Signature: Date:						
Address:	(itv:		State: Zip:			