

National Sweet Sixteen Sailing Association (NSSSA)
2010 -11 Membership Application
(Membership Expires March 31, 2011)

Thank you for your continued support of YOUR organization.

Owners Name _____ Application Date _____

Owner's Address _____
(Street) (City) (State) (Zip)

Home Phone Number _____ Mobile Number _____

Email _____

Sail Number _____ Hull Number _____ Sailing Club Affiliation _____

Correspondence/Contact Preference: _____ Email _____ Postal

Sailing Background - Please indicate all applicable categories of your sailing experience below:

Novice Intermediate Well-Seasoned Recreational Racing

Membership Category - Please choose your desired annual membership:

Regular (\$20) Contributor (\$25) Sponsor (\$50)
 Associate (\$10) Youth (\$10) Co-Owner (\$10)

Make check payable to "Sweet Sixteen Sailing Association"
Mail payments to: NSSSA, c/o Connie Henderson, 5812 W 145th St, Overland Park, KS 66223

List any alternate sail numbers: _____

List any co-owner of this boat who is not a family member: _____

Would you be willing to serve on a committee in some capacity? Yes No

If yes, please indicate areas of interest: _____

Please list any specific questions or comments you have about the NSSSA: _____
