



Matlacha Mariners, Inc.
P.O. Box 21, Matlacha, FL 33993
www.matlachamariners.org

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Cell Phone _____

E-mail _____

Address (2) _____

City _____ State _____ Zip _____

Telephone _____ Cell Phone _____

E-mail _____

As a member of the Matlacha Mariners I agree that I will try to be a positive role model for today's youth and tomorrow's leaders. When possible I will participate in fund raising projects or other special events organized by the Mariners and upon notification, try to help or assist our sister organization "The Matlacha Hookers".

Member Signature _____ Date _____

Please include your check for \$20 made payable to Matlacha Mariners, Inc.

Stay up to date by accessing our web site at www.matlachamariners.org