

# FERNANDINA PIRATES CLUB, INC.

## APPLICATION INFORMATION

Name:		
Date of Birth:	Home Phone:	Cell Phone:
Current Address:		
City:	State:	Zip Code:
Email:		
EMPLOYMENT INFORMATION		
Current Employer:		
Employer Address:		How Long?
Phone:	Email:	Fax:
City:	State:	Zip Code:
Position:		
EMERGENCY CONTACT		
Name of a relative not residing with you:		
Address:		Phone:
City:	State:	Zip Code:
Relationship:		
SPOUSE INFORMATION IF JOINT MEMBERSHIP		
Name:		
Date of birth:		Phone:
SPONSORING PIRATE		
Name:		
SIGNATURE		
I authorize the Fernandina Pirates Club, Inc. ("Club") to have background check performed on me and agree to read the Bylaws and Policies and Procedures of the Club.		
Signature of Applicant:		Date: