



AZ FRAG CLUB MEMBERSHIP APPLICATION

ANNUAL DUES: \$10

APPLICANT INFORMATION

Name:		
Email:	Phone:	
Current address:		
City:	State:	ZIP Code:
Occupation:	How did you hear about us?	
Reef Central Handle:	Reef2Reef Handle:	
AZ FRAG Handle:	PROP Bidder Number (if known):	
Years of Saltwater Experience:		
Any notable expertise?		

IMMEDIATE FAMILY MEMBERS IF MEMBERSHIP PRIVILEGES DESIRED

Name	Name
Name	Name

SIGNATURE

I agree to abide by the by-laws of AZ FRAG. Membership will be valid until December 31st of the current year.

Signature of applicant:	Date:
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**Please submit completed form to azfragclub@gmail.com
Dues (\$10) will be collected at the next meeting of attendance**