



2026 Lake Monroe Sailing Association, Inc Membership Application

NAME _____ EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

SPOUSE/PARTNER _____ CHILDREN _____

EMERGENCY INFORMATION DATE OF BIRTH _____ SEX _____ HEIGHT _____

_____ HAIR COLOR _____ MEDICAL CONDITIONS: MEDICATIONS _____

ALLERGIES _____
EMERGENCY CONTACT _____ RELATIONSHIP _____ PHONE _____

PRIMARY VESSEL INFORMATION YEAR/MAKE/MODEL _____

OWNER OR CREW (circle one) NAME OF BOAT _____

REGISTRATION # _____ COLOR _____

MEMBERSHIP FIRST TIME MEMBER \$80 _____ ANNUAL ASSOCIATE MEMBER \$80 _____
ANNUAL MEMBERSHIP \$200 _____

PAST MEMBER NOT CURRENT WITH DUES \$200+ \$30 RE-INITIATION FEE \$180 _____

Associate Member: Members not residing in a county NON adjacent to Seminole county or out of state members. Each paid Membership constitutes ONE vote. Annual Membership is renewable January 1 st .

APPLICATION SIGNATURE : _____ Date : _____

**LAKE MONROE SAILING ASSOCIATION 531 North Palmetto Avenue SANFORD, FL
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