

# MANATEE COVE MARINA MEMBERSHIP APPLICATION

Member # \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
Spouse \_\_\_\_\_ DoD ID # \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Branch of Service/DoD \_\_\_\_\_ Grade \_\_\_\_\_ Status \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

## MEMBERSHIP ACTIONS

### ADDRESS CHANGE:

Street \_\_\_\_\_ Email \_\_\_\_\_  
City/State/Zip Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### RESIGNATION:

Resignations must be presented in writing and MUST REACH the Manatee Cove Marina prior to the 15th of the month WITH security gate access card (if issued) AND Marina Membership card or fees will be charged and become collectible for that month.

**I resign my Manatee Cove Marina membership - effective:**

**Membership Card returned:** \_\_\_\_\_ **Security Gate Card returned:** \_\_\_\_\_  
*(\$10 fee if card not returned)*

**Reason for resignation:** \_\_\_\_\_

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

#### PRIVACY ACT NOTICE

AUTHORITY: 10U.S.C.8012, 44U.S.C.3101: AND EO 9397

PRINCIPLE PURPOSE: To serve as a membership application for an individual wishing to join the Patrick SFB Manatee cove Marina.

ROUTINE USES: To maintain accountability of members and serve as emergency listing to each new member.

DISCLOSURE IS VOLUNTARY: Failure to provide the necessary information could result in refusal of membership.

**Member Signature:** \_\_\_\_\_

**Staff Int/Date:** \_\_\_\_\_ / \_\_\_\_\_

Please Use the Google Drive App to fill out on a cell phone.