



Tellico Boaters Assistance Response Team, Inc.

www.TBART.org

Membership Application

Date ____/____/____

Name _____

Circle type of boat you own:

Spouse Name _____

Cruiser Pontoon Deck boat Bow rider

Other _____

Address _____

Boat Name _____

Length _____Horsepower _____

Phone _____

Is boat capable of winter duty? Yes No

Cell Phone _____

Communications Capability (Circle)

Email _____

VHF Radar GPS Other _____

Occupation (Past/Present):

Occupation (Past/Present):

Applicant _____

Spouse _____

Applicant is applying to become a

Spouse: NOT applying _____

Captain _____ Crew _____

Captain _____Crew _____

Spouse Only Crew _____

Tee Shirt Size (Circle)

Spouse Tee Shirt (if applying)

S M L XL XXL

S M L XL XXL

Years of Boating Experience:

Years of Boating Experience:

Applicant: Lake ___ River ___ Ocean

Spouse: Lake ___ River ___ Ocean ___

To be qualified for duty, TBART requires all joining members to complete, or have completed within the last five years, a boating safety course certified by the U.S. Coast Guard Auxiliary, the U.S. Power Squadron, or equivalent.

Applicant: Year ____; Certification Attached ____ or Need to take ____

Spouse, if applying: Year ____; Certification Attached ____ or Need to take ____

If you have successfully completed an equivalent course, with an exam, please state the name of the course and year completed. _____

List any other boating organizations that you are a current or previous member.

Please share with us your reasons for applying for membership. _____

You are aware that TBART is a volunteer organization and that your regular participation in meetings, activities, and duty is expected as a responsibility for membership. Please plan on 2 days a month for on water duty.

As a captain, your boat must be equipped with the necessary equipment to facilitate a response to a typical boater and his assistance requests. This requires passing an annual watercraft safety check and equipment inspection. TBART Inc. carries secondary liability insurances for its members while participating in TBART activities.

Membership dues are \$10.00 a person/\$20 a couple (if spouse is applying) per year. DUES ARE REQUIRED WITH THIS APPLICATION and are due annually by December 31st for the following year.

By your signature(s) below, you attest that the information provided above is accurate and that you intend to fulfill the requirements for membership.

Signature of Applicant

Signature of Spouse (if applying)

Application Approval:
Director of Membership _____ Date _____

President _____ Date _____