

Lighthouse Point Saltwater Sportsman Association

Member Roster Update.

NAME:

PHONE
(HM):_

SPOUSE

DIVER (Check
If Yes)

PHONE
(WORK):

ADDRESS

FAX

CELL:

E-MAIL

CITY:

ST:____ZIP:_____

BUSINESS OR PROFESSION:

BOAT INFORMATION

BOAT NAME:

LENGTH:_____TYPE:

MANUFACTURER:

DATE

Please copy this form and mail updated information to:
Barney Goldberg 2331 NE 34th Ct., Lighthouse Point, FL 33064