

TOPPS – MEMBERSHIP APPLICATION

TEXAS OFFSHORE PERFORMANCE POWERBOAT SQUADRON

(A Non-Profit Corporation) Clear Lake, Texas

YOU ARE REQUIRED TO PROVIDE A COPY OF YOUR CURRENT INSURANCE POLICY

New Member: Renewal:	Name:		
Spouses Name:	Occupatio	on/Business:	
Wk Phone: Fa:	x No	Cell No	
Home Phone:	E-Mail Address:		
Address:	City:	State: Zip:	
Sponsors Name:			
Boat Name:	Length:	Type/Make:	_
		rmation for Business Card Ad in Newsletter Onl	•
Address:	Compan City:	y: State: Zip: Web Page:	
Business Phone No	Fax No	Web Page:	
by the Texas State Parks & Wildlife Divida3) I hereby certify that I carry and will main of my insurance policy each year when I FULL VOTING MEMBE I have presented a copy of my insurance policy. FULL VOTING CORPORATION (A1, A2, & A3) as a Funewsletter. I have presented a of my insurance policy. NON-VOTING CORPORATION (A1, A2, A3, A3) as a full partner in the company as full partner in the company as full partner.	ision. www.boat.ed.com ntain a minimum liability ins pay my dues. R - Annual Dues \$175.00 Safe Boating Certificate RATE MEMBER - Annual Il Voting Corporate Mem copy of my Safe Boating	and (2) that I must have passed a Boating Safety Course turance on my boat of at least \$100,000. And I will provide the Provided of the Secretary of TOPPS along with a copy of all Dues \$250.00 -My membership conforms to the interest ber and will include a monthly business card ad in the Certificate to the Secretary of TOPPS along with a Copy of Dues \$300.00 - Member must be the owner of a copy (A1). Included is a monthly business card ad in the	e a copy 3) above. my tems he h a copy
newsletter. NON-VOTING ASSOCIATE conforms to items (A1)	<u>ΓΕ MEMBER</u> - Annual I	Dues \$200.00 – Prior Membership. My membership	
		pership conforms to items (A1, A2, & A3) above. I he Secretary of TOPPS along with a copy of my ins	
GUEST MEMBERSHIP -	\$100.00 (7) Day Guest	Membership conforms to items (A1, A2, & A3)	
OFFICE USE ONLY			
DATE:PROOF O	F INSURANCE:	DONATION:	
AMOUNT PAID:CA	SH:CHEC	K:CHECK NUMBER:	



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(A Non-Profit Corporation) Clear Lake, Texas

Send Application, Proof of Insurance, Boating Safety Documentation, and Check to: TOPPS, Attn: Secretary, PO Box 1189, Seabrook, TX 77586

MEMBERSHIP AGREEMENT

Membership in the Texas Offshore Performance Powerboat Squadron, a non-profit Texas Corporation herein referred to as TOPPS includes the following benefits to each individual member.

- 1. Registration for each member in applicable categories.
- 2. Monthly TOPPS Newsletter.
- 3. The right to participate in all TOPPS sanctioned events.
- 4. The right to attend TOPPS membership meetings and events.
- 5. A copy of the TOPPS Bylaws.

In consideration of being granted the above benefits of membership in TOPPS.

- I, THE UNDERSIGNED, for myself my personal representative, heirs, next of kin, successors and assigns, DO AGREE:
- 1. To drive my boat in a safe manner and abide by all applicable Coast Guard rules and regulations.
- 2. To assume responsibility and liability for the conduct of myself, my guests and my crew at TOPPS sanctioned events.
- 3. To be bound by all TOPPS rules and that decisions by its officials and/or interpretation of its rules will be governed exclusively by the TOPPS Bylaws.
- 4. To acknowledge that the activities of a TOPPS sanctioned event are potentially hazardous and potentially involve the risk
- of serious injury, death and/or property damage.
- 5. And warrant that I have read and understand the foregoing provisions; I accept the valuable BENEFITS OF MEMBERSHIP as good, valid and adequate considerations; the statements in my application are true and TOPPS may rely on them and upon all my commitments in entering into a membership contract with me.

I HAVE ENCLOSED ANNUAL DUES AND IF APPLICABLE PROOF OF INSURANCE, BOATING SAFETY DOCUMENTATION AND HEREBY APPLY FOR MEMBERSHIP IN TOPPS, A TEXAS NON-PROFIT CORPORATION; AND I HAVE SIGNED AND WILL ABIDE BY THE MEMBERSHIP AGREEMENTAPPLICATION.

I understand that, unless I have applied for Corporate, Racing or Guest Membership Status, my application for membership will be announced when my sponsor and I attend the next general meeting, and will be voted upon when I attend the following general membership meeting.

I have received and read the most recent Bylaws governing TOPPS Initial:			
SIGNATURE OF APPLICANT	_		
PRINT NAME			
SIGNATURE OF SPONSORING MEMBER			
PRINT NAME			
DATE			