## \_\_\_\_\_ ASSOCIATION INVITATION-APPLICATION FOR MEMBERSHIP LOGO

PERSONAL	INFORMATI	ON			
First Name:		MI:	Last Name:		
Gender:	Male	Female	Occupation:		
Date of Birth	n:				
Address:					
Phone:			E-Mail:		
Please reviev	w qualification	criteria and fees f	or the following.		
I am now a:	New M	1ember			
	Forme	r Member	Transfer Member		
FEE (BZ\$ 0)	<u>Honorary Member</u> Any member of the flats fishing community upon submittal of the required completed application who has dedicated his/her life to this area and has made a career to flats fishing or conservation or training.				
FEE (BZ\$ 100)	<u>Apprenticeship Member</u> This shall include a part-time or full-time person who is being trained and sponsored by a Guide Member. The sponsor fee shall be fifty-dollars or more per day.				
FEE (BZ\$ 150)	<ul> <li>Guide Membership The following shall be conditions to becoming a flats fishing Guide Member of the association. Any failure to adhere to the requirements and/or to follow the Association's Purpose can result in discontinuance of the applicable Guide Member's status at the sole discretion of the Board: <ul> <li>(a) must be over the age of 18;</li> <li>(b) must submit completed application along with registration fee (as defined below);</li> <li>(c) shall be at all times in conformance with all the rules and regulations set forth by the Belize Tourism Board and other protected areas;</li> </ul> </li> </ul>				
	<ul><li>(d) shall at all times have a valid tour guide license for at least two years of operation;</li><li>(e) such proposed Guide Member's application shall be reviewed and approved by the board.</li><li>(f) The proposed Guide Member shall have Belizean residency.</li></ul>				
FEE (BZ\$ 200)	Associate Member This shall include Non-Guide Members who actively supports theAssociation and its goals, but without voting privileges. However, his/her interest shall be represented by one appointed Board Member.				

FEE (BZ\$2000)	non-governmental organizatis logo displayed in the acknowledged once a year	Association's webpage, outreach activities and ar if they so request during an event such as annual ember has no voting privileges but can serve as advisors.
I would hereb	y apply for	Membership.
		ip Member. I shall be trained and sponsored by a Guide of (address).
<b>EMERGENC</b>	Y CONTACT INFORMAT	ION
Name of Rela	tive not resideing with you:	
Address:		Phone:
Relationship:		
OFFICIAL IN	IFORMATION	
Member Assi	gned Number:	
Member Cate	gory Applied For:	
Date Reviewe	d:	
OTHER		
Enclosed is \$	as an entrance fee.	
the Memorano	rendering personal service	Association and if elected, agree to be bound by tion and rules of the time being in force. I recognize the e to my community and protecting and respecting our
APPLICANT	'S SIGNATURE	OFFICER IN CHARGE

**NOTE:** SIGNATURE NEEDS TO BE SAME AS IN YOUR SOCIAL SECURITY CARD