



OPA RACING, LLC.

**799 Route 70
Brick, NJ 08723
732-920-3945**

2008 INDIVIDUAL MEMBERSHIP FORM

NAME _____ **DATE** _____

ADDRESS _____

CITY, STATE & ZIP _____

SOCIAL SECURITY NUMBER _____

DATE OF BIRTH _____

HOME PHONE _____

BUS. PHONE _____

CELL PHONE _____

FAX NO. _____

E-MAIL _____

RACING MEMBER _____ **NON-RACING MEMBER** _____

BOAT NAME _____ **BOAT NUMBERS** _____

OPA MEMBER SIGNATURE _____

OPA MEMBERSHIP - (FEE BASED ON WHAT CLASS YOU ARE RUNNING IN))

PAYMENT TYPE - CHECK _____ **CASH** _____ **CREDIT CARD** _____

RECEIVED BY - (OPA OFFICIAL ONLY) _____