



MEMBERSHIP APPLICATION 2022

Columbia Drag Boat Association

Send this form w/ payment to:
CDBA
 17725 SE Foster Dr.,
 Damascus OR 97089

Name:				DOB:	
Phone:		Cell:			
Address:					
City:			State:	ZIP Code:	
Email:					
Name of Spouse or significant other:					

MEMBERSHIP INFORMATION

Check appropriate membership type:

<input type="checkbox"/> ASSOCIATE MEMBER - <i>Non-racing member</i>	\$75.00
<input type="checkbox"/> DRIVER - <i>Boat driver only, do not own the boat. The owner has to be a member as well</i>	\$225.00
<input type="checkbox"/> OWNER - <i>Boat owner only, do not driver/compete. The driver has to be a member as well</i>	\$225.00
<input type="checkbox"/> DRIVER/OWNER (SAME PERSON) - <i>Driver and boat owner</i>	\$225.00
<input type="checkbox"/> ONE TIME/WEEKEND - <i>for one time event membership. No points awarded, eligible for member courtesies for same event.</i>	\$100.00

EMERGENCY CONTACT

Name of emergency contact:		
Cell:		Phone:

BOAT INFORMATION

<input type="checkbox"/> PWC <input type="checkbox"/> JET <input type="checkbox"/> FLAT <input type="checkbox"/> HYDRO <input type="checkbox"/> OUTBOARD <input type="checkbox"/> W/ CAPSULE	FUEL: <input type="checkbox"/> GAS <input type="checkbox"/> ALCOHOL <input type="checkbox"/> NITROUS <input type="checkbox"/> NITRO METHANE
BOAT #	BOAT NAME:
CLASS:	ENGINE:
<input type="checkbox"/> PWC <input type="checkbox"/> RR <input type="checkbox"/> SE <input type="checkbox"/> ME <input type="checkbox"/> TE <input type="checkbox"/> QE <input type="checkbox"/> PE <input type="checkbox"/> PM <input type="checkbox"/> PO <input type="checkbox"/> OTHER:	

LICENSE INFORMATION

CAPSULE TRAINING

LICENSED IN WHICH CLASS(S): <input type="checkbox"/> TE <input type="checkbox"/> PE <input type="checkbox"/> PM <input type="checkbox"/> QE <input type="checkbox"/> PO OTHER:	DATE OF CAPSULE TRAINING: ___/___/___
ISSUED BY: <input type="checkbox"/> CDBA <input type="checkbox"/> KDBA <input type="checkbox"/> NJBA <input type="checkbox"/> SDBA <input type="checkbox"/> ADBA	SANCTIONING BODY:
DATE OF PHYSICAL: ___/___/___ DATE LICENSED: ___/___/___	OFFICIAL USE ONLY <input type="checkbox"/> DOCUMENTATION REVIEWED
OFFICIAL USE ONLY <input type="checkbox"/> DOCUMENTATION REVIEWED <input type="checkbox"/> DOCUMENTATION COPIED <input type="checkbox"/> REVIEWED BY:	OFFICIAL USE ONLY <input type="checkbox"/> DOCUMENTATION COPIED
OFFICIAL USE ONLY <input type="checkbox"/> LICENSE ISSUED <input type="checkbox"/> DRIVER RECEIVED ON: ___/___/___	OFFICIAL USE ONLY REVIEWED BY:

SIGNATURES

By signing below, I understand that I am becoming a member of the Columbia Drag Boat Association and agree to follow all rules and regulations set forth by the Columbia Drag Boat Association, and all County, State, and Federal laws and regulations including those for the venues or race sites where I will be attending racing and other Association events. I understand that by not following these rules, regulations, and laws that I am jeopardizing my status as a member of Columbia Drag Boat Association and will be held liable for any damages, fines, or other expenses incurred by the Columbia Drag Boat Association as a result of my actions.

Signature of applicant:	Date:
Application approved:	Date:

Official use only
 Membership card issued: ___/___/___ Bylaws issued: ___/___/___ Decal issued: ___/___/___

Official use only
 Paid by: Cash Check # _____ Visa MC AMX Discover Last 4: _____ Amount \$ _____

Staff member: _____