



Los Angeles Rod and Reel Club Application for Membership

Date: _____ -

Name(s) to be considered for membership: _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone: () _____

Email: _____

Occupation: _____

Name of Business _____

Work Phone (optional) _____

Type of Membership Applying For (Please Circle): **Active** Non-Resident (Outside CA)

Applicant's Signature _____

Sponsored By: _____

Membership Chairperson's Signature _____

President's Signature _____

Date of Approval by Board of Directors _____

Please fill out this form and mail/email to:

Richard Stone
LARRC Membership Director
21118 Elder Creek Drive,
Saugus, CA, 91350
richardstone@specialtyrepswest.com