

SSMA Membership Application

Name _____

Address _____

City _____

State _____ Zip code _____

Are you a member of a local club? Y _____ N _____

If so, what club? _____

Please indicate what types of ships you are interested in (mark all that apply)

Military _____ Fast electric _____ Pleasure _____

Coast Guard _____ Civil War _____ Submarine _____

Work boat _____ Paddle wheel _____ Sail _____

Other (please describe) _____

Type of Construction you do (mark all that apply):

Kit _____ Scratch _____ Partial kit _____ R-T-R _____

Type of power you use:

Electric _____ Steam _____ Wind _____

Dues are \$20.00 (us funds) for a 12 month membership.

Please make out check to: **SSMA** and send to:

Patric Layman
 Membership Director
 3461 State Road
 Hillsdale MI 49242