

Peconic Bay Power Squadron
Roster Update

Date: _____
Day Month Year

Old Listing

New Listing

Rank	_____	_____
Name	_____	_____
Grade	_____	_____
Address	_____	_____
City, State Zip	_____	_____
Phone Number	_____	_____
Spouse's Name	_____	_____
Member #	_____	_____
Year Joined	_____	_____
# of Merit Marks	_____	_____
Boat Name	_____	_____
Power or Sail?	_____	_____
Email Address	_____	_____

Please mail completed form to:
Peconic Bay Power Squadron
Care of Sherman
149-D Riverside Drive
Riverhead, NY 11901