



MARINA ADVISORY COMMITTEE APPLICATION

Name _____ Phone (____) _____

Mailing Address _____

Email _____

Please identify the stakeholder group you represent (select all that apply):

- Commercial boat building
- Commercial fishing
- Environmental
- Other interested party
- Tribal treaty fishing
- Boathouse owner or Liveaboard tenant
- Citizen at large (unaffiliated with the marinas)
- Marine trades repair (boatyard or shipyard)
- Recreational boater
- Yacht Club member: PAYC SBYC

Have you been associated with either marina: No Yes – PABH Yes – JWM

Are you – or have you been - a marina tenant: No Yes – PABH Yes – JWM

Do you own a vessel: No Yes _____
(List length and type of vessel, and which marina or use via trailer)

Personal Background/Experience:

Are you a Clallam County resident? **Yes No**

Are you aware of any conflict of interest which might arise by your service on this Committee?

Please explain. _____

Why would you like to participate in this committee? _____

What is your experience with marinas? _____

Please return the completed application to Braedi Brown by mail (P.O. Box 1350, Port Angeles, WA 98362), by email (braedib@portofpa.com), by fax (360-452-3959) or in person (338 W. 1st Street, Port Angeles, WA 98362).

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Applicant Signature Date