



**SCPIA Membership Application Form**  
[www.PaddleSouthCarolina.org](http://www.PaddleSouthCarolina.org)

**Name of Company or Individual Member**

Name of Person Representing Company: \_\_\_\_\_

Address of Company/Member: \_\_\_\_\_

Phone #'s: \_\_\_\_\_

Website: \_\_\_\_\_

Email: \_\_\_\_\_

What do you represent in the Paddlesports Industry?

\_\_\_\_\_ Retail \_\_\_\_\_ Rental Outfitter (Livery) \_\_\_\_\_ Guided Tour Outfitter

\_\_\_\_\_ Individual who paddles

What Specific areas of Water and Vessels do you represent?

\_\_\_\_\_ Whitewater \_\_\_\_\_ River \_\_\_\_\_ Sea/Ocean \_\_\_\_\_ Canoes

\_\_\_\_\_ Kayaks \_\_\_\_\_ Rafts \_\_\_\_\_ Paddleboards \_\_\_\_\_

Other? Please list: \_\_\_\_\_

How many years have you been in the business? \_\_\_\_\_

Are you an ACA member? \_\_\_\_\_

Do you or your staff have any ACA Certifications/Endorsements?

Do you or your staff hold any ACA Instructor or IT  
Certifications? \_\_\_\_\_ If so, which ones? \_\_\_\_\_

Do you hold any Certified Training in Paddlesports other than ACA? \_\_\_\_\_

If so, please list: \_\_\_\_\_

Are you interested in any Volunteer Opportunities with the SCPIA? \_\_\_\_\_

If so, you may be asked to help with a committee: please check which areas?

Membership \_\_\_\_\_ Policy \_\_\_\_\_ Booth/Events \_\_\_\_\_

Ethics \_\_\_\_\_ Topic Presentation \_\_\_\_\_

Hosting a Meeting/ Workshop \_\_\_\_\_ Other? \_\_\_\_\_

Are you interested in holding an Executive office or being on the Board of the SCPIA in the future? \_\_\_\_\_

Please send a check payable to the SC Paddlesports Industry Association for \$50.00. Checks may be made out to SCPIA. This membership will be good for One Year. Thank you.

Current Address to send it to our SCPIA Treasurer: **Ralph Earhart, 1591 Holton Place, Charleston, SC 29407.**