



2024 Processor Authorization Form

Name: _____

F/V: _____

Address: _____

Phone: _____

Email: _____

Please circle one of the following:

Alaska General Seafoods

Trident Seafoods

OBI Seafoods

Silver Bay Seafoods

Other _____

Please select one of the following amounts:

_____ **\$900 Skipper & Crew** _____ **\$750 Skipper**

I hereby authorize the above indicated processor to deduct my chosen amount from my account and direct the processor to remit this amount within 180 days to the Southeast Alaska Seiners for membership dues.

Signature _____ Date _____