



St. Andrews Bay Yacht Club Sailing Membership Application



Date: ____/____/____

Member Information:

Name: _____ Member's DOB: ____/____/____

Primary (Home) address: _____

City: _____ State: _____ Zip: _____

Secondary address (if applicable): _____

City: _____ State: _____ Zip: _____

Home #: _____ Cell #: _____

E-Mail: _____ Occupation: _____

Company name: _____

Company address: _____

City: _____ State: _____ Zip: _____

Office #: _____ Fax #: _____

Boat Name, Make, & Length: _____

Club affiliations: _____

Civic affiliations: _____

Hobbies/Interests: _____

I prefer my monthly **Statement** to be mailed to my: Primary____, Secondary____, or Company address____.

I prefer my monthly **Newsletter** to be mailed to my: Primary____, Secondary____, or Company address____.

St. Andrews Bay Yacht Club

Spouse Information:

Name: _____ Spouse's DOB: ____/____/____

E-Mail: _____ Occupation: _____

Company name: _____

Office #: _____ Cell #: _____

Dependent Information:

Name & date-of-birth for each: _____

Existing Member Sponsors:

1. _____ 2. _____
Member name Member name

Dues:

Dues are fifty dollars per month. There is no initiation fee.

Resignations:

A member may resign from the Club in good standing by submitting a letter of resignation, in writing, to the Board of Governors and by paying dues and assessments to the end of the month in which the resignation is submitted.

The undersigned agrees to conform to and be bound by the Bylaws, Rules and Regulations of the Club, as they may be amended from time to time. The undersigned also agrees to pay all dues, fees, and charges associated with his/her membership.

Applicant's signature _____ Date: ____/____/____