

## Application for Membership

Name: (Last)	(First)		(Middle)				
Home Address:							
City:							
Home Phone:	C		Date of Birth:				
E-Mail:			Marital Status: sin	igle marrie	edsig.o	ther	
Business Name:							
Type of Business:			Title:				
Business Address:			State	ment to busin	ess: yes _	no	
City:	Stat	eZip_	E-Mail				
Business Phone:	We	Work/Cell		Fax:			
	SPOU	SE/SIGNIFIC	CANT OTHER				
Spouse's name: (Last)	(First)			(Middle)			
Home Phone:	Cell Phone:			Date of Birth:			
E-Mail		Busine	ess Name:				
Type of Business:			Title:				
Business Address:		Cit	У	State	Zip		
E-Mail	Bus	iness Phone	:	Fax:			
Names of Minor Children			Date of Birth		Male		
	BOAT INFOR	MATION (pl	lease fill out completely	)			
Do you own a boat?	Boat Name			Manufacturer_			
Power Sail G	as Diesel	Length	LOA	Draft	Beam		
100% Owner One	One Half Owner One Third Owner One Fourth Owner						
If not 100% Owner, Other Ow	ner(s) and Addresses:						

## MEMBERSHIP ENDORSEMENT

		? members in good stan rship Chair may assist		applicant is not known to the required number of g endorsements.
*Primary Sponsor		Mer	nber #	Signature
Secondary Sponsor_		Mer	nber #	Signature
		NEW MEMBE	R PARTIC	IPATION
			-	rst year of their membership. Events can include social <i>ant Initials</i>
*It is expected that p Primary Sponsor Ini	• •	ill check in quarterly v	vith new mer	mbers to discuss club participation.
		AFFI	LIATIONS	5
Current Member of	Following Clubs: _			
How Did You Hear	About TYC?			
		INITI	ATION FEI	Е
The initiation fee mu	ust accompany this	membership application	on when pres	sented to the Club Membership Manager.
I am applying for TY	YC Membership in	the following category	(check one)	):
Acti	ve Moorage	Active Non-M	loorage	Associate/Social
Active Inte	ermediate	Age?	Associa	ate Intermediate Age?
Initiation Fee:				I will pay by Check Visa/MC
Paid in Full:	Received by	y:		Date:
	R	ESIGNATION FROM	и тасом	A YACHT CLUB
date of resignation w family membership	vill be the date the cards, outstation ar	Board approves the ap	plicant's writ ourgees. Pay	mbership Chair or Membership Manager. The effective itten notification and has received the applicant's and yment of all outstanding charges for which the applicant
		PAYMENT OF MI	EMBERSHI	IP ACCOUNT
•	• •	t of the monthly statem int is delinquent will be		ant agrees to pay the account when due. Membership
TYC Board of Trust	ees. As part of suc and credit standing	ch review, TYC may m	ake inquiries	C Membership Committee and must be approved by the as regarding my character, general reputation, criminal gree to acquaint myself with the House Rules and By-
Applicant's Signati	ure			Date:
Email Address for	monthly billing			