

WHITBY YACHT CLUB MEMBERSHIP APPLICATION

CIRCLE APPLICATION TYPE: **NEW MEMBER** **MEMBERSHIP CLASS CHANGE** **CHANGE OF MEMBER INFORMATION**

Please complete this form in full. If you are being sponsored by club members, please provide their contact information. If not, please provide two non-family references, for our Membership Committee. Credit checks may be conducted on any applicant.

Applicant 1. Name		EMAIL:		Phone
Address:	City:	Prov:	Postal:	
Applicant 2. Name		EMAIL:		Phone
Address:	City:	Prov:	Postal:	
Dependent Children Names/ages:	1)	2)		
3)	4)	5)		

EMPLOYMENT INFORMATION

Employer:		Occupation:		
Employer address:		Length of time:		
Phone:	E-mail:	Fax:		

EMERGENCY CONTACT INFORMATION

Name:	Relationship:	Address:
Phone #1	Phone #2	Email:

MEMBERSHIP TYPE, VESSEL DETAIL, INSURANCE INFORMATION

Senior:	Dock Needed (Yes/No)	Social:	Dry-sail:	Dinghy:
Vessel Type:	Name:	Tender? Yes/No	Name:	
Length overall:	Beam:	Draft:	Steel Cradle Confirmed: Yes/No	
Insurance Company:		Policy:	Expiry Date:	

WYC OR PERSONAL REFERENCES

Name	Address	Phone
1)		
2)		

SIGNATURES

Throughout the year members and staff may take photos of members participating in club activities. These photos are typically kept in photo albums displayed on the club website, or printed in the monthly newsletter. Some may be used in promotional materials, local newspapers or included on social media.

By signing below, I/we consent to the use of images of myself and/or my family as indicated above.

Signed, Applicant 1: _____ Signed, Applicant 2: _____

I/WE HEREBY APPLY FOR MEMBERSHIP IN THE WHITBY YACHT CLUB. I/WE UNDERSTAND THE BOARD OF DIRECTORS RESERVES THE RIGHT TO APPROVE, NOT APPROVE, OR APPROVE WITH CONDITIONS, THIS APPLICATION. IF ACCEPTED FOR MEMBERSHIP, I/WE AGREE TO COMPLY WITH ALL BY-LAWS, RULES AND REGULATIONS OF THE CLUB AS AMENDED FROM TIME TO TIME. I/WE FURTHER UNDERSTAND AND AGREE (i) TO INSURE ALL MEMBER VESSELS AND TO PROVIDE WITH THIS APPLICATION A COPY OF A VALID INSURANCE POLICY FOR THE VESSEL(S) (ii) TO ATTACH A CHEQUE FOR \$100 TOWARDS MEMBERSHIP FEES FOR DINGHY, DRY SAIL OR SENIOR MEMBERSHIP (iii) **THAT 20 WORK HOURS ARE REQUIRED TO BE COMPLETED ANNUALLY, (Subject to change) OR MY ACCOUNT WILL BE CHARGED AT \$45 PER HOUR, OR WYC's PREVAILING HOURLY RATE.**

Applicant 1 Signature: _____	Date: _____
Applicant 2 Signature: _____	Date: _____
Approved by Rear Commodore Membership for WYC Board _____	Dated: _____

