



POINT BREEZE YACHT CLUB

Kent, New York 14477

Application for Membership

I wish to apply for _____ membership in the Point Breeze Yacht Club.
(Please fill in "Boating" or "Associate" membership in the space above.) BOATERS please fill in bottom of this application.

Name: _____ Name of Spouse (if applicable): _____

Home Address: _____ Telephone: _____

Employer: _____ Address: _____ Business Telephone: _____

Sponsors: (Two members of the Point Breeze Yacht Club)

Do you now, or have you ever, belonged to another Yacht Club? YES or NO (please circle one)

If "YES" please give name and address of Club

I was a member of this Club from _____ to _____

References from previous club (Two required. Do not list sponsors shown above.)

Name: _____ Address: _____ Telephone: _____

Name: _____ Address: _____ Telephone: _____

If this application is accepted, are you interested in participating in club social activities? _____

If this application for membership in the Point Breeze Yacht Club is accepted, I agree to abide by the rules, regulations and by-laws of the Club.

Signature: _____

FOR CLUB USE ONLY

Date Received: _____ Date for final consideration: _____

Fees received: _____

Received by: _____ Accepted for Membership: _____

DESCRIPTION OF BOAT

Name of Boat: _____ Builder: _____

Circle Type: Cruiser Day Cruiser Runabout Sloop Ketch Cutter Yawl

Other Specify: _____

Length: _____ Beam: _____ Draft: _____

Radio Call Sign, if any _____ Vessel License/Registration Number: _____