

Application for Membership Personal Information

Full Name:	Spouse/SO Name:			
Home Address:	City:			
State: Zip:	Phone: (H)	(C):		
Email:	Work Contact Info:	Work Contact Info:		
Employer:	Address:	Address:		
Do you own a boat? Yes or No if Yes, do y What boating organizations do or have you l	_	-		
	Vessel Information			
Year/Make/Model:	Na	me:		
LOA: Beam: Draft:		Outboard	Inboard	
*Registration Number & Expiration Date:				
*Marine Insurance Provider & Expiration Data *A copy of your valid registration	te: on and Marine Insurance must be subi	mitted with this appli	ication	
<u>P</u>	Personal References (List 3)			
Name:	City/State:	Phone Number:		
This application is for Full Membership at Ravena Coe and fees as established within the By-Laws of Ravena C Yacht Club, Inc., must carry Marine Liability Insurance of insurances is required prior to membership approva application for membership at the initial interview with the Acknowledgement: I, the undersigned, acknowledge that I have read, under	Soeymans Yact Club, Inc. Boat owners the with limits as prescribed in our By-Laws. al. It shall be further understood that the Membership Committee.	nat are docked and/or s A copy of the vessel' he initiation fee of \$7	stored at Ravena Coeyman 's registration and certificat 50.00 must accompany th	
at Ravena Coeymans Yacht Club, Inc.	istanta una agree to asiae sy me raice ac	oompanying tillo appil	outon for i un moniboroni	
Accepted:(Signature of Applicant/Boat Owne	Dated this	day of	, 2019	
The above applicant is sponsored by:				
Approval of Membership Committee: Dated	Approval for F	Approval for Full Membership: Dated		