

APPLICATION FOR ASSOCIATE MEMBERSHIP

MARQUETTE YACHT CLUB

1218 N Crisman Road
Portage, IN 46368
(219) 762-9961
Affiliated with LMYA

New Renewal

YEARLY MEMBERSHIP DUES: \$150.00

DATE _____

Please Print Or Type, I, _____ hereby make application for membership in the Marquette Yacht Club. I understand this membership entitles me to all rights and privileges for the Marquette Yacht Club as set down by the Constitution and By-Laws, and if accepted, I promise to abide by same. I understand this application is subject to approval by the Board of Directors of Marquette Yacht Club AND I MUST BE PRESENT WITH MY SPONSOR AT SAID BOARD MEETING TO BE ACCEPTED OR REJECTED BY THE BOARD FOR MEMBERSHIP.

ADDRESS _____

CITY,STATE,ZIP _____

OCCUPATION _____ AGE: _____

SPOUSE'S NAME _____

***NEW MEMBERS ONLY:** NAME OF CHILDREN & BIRTHDATE:

HOME PHONE _____ CELL _____

BUSINESS PHONE _____ EMAIL: _____

***NEW MEMBERS ONLY:** ATTACH RECENT PHOTO

THE FOLLOWING MAY BE PRINTED IN THE CLUB DIRECTORY:

HOME PHONE CELL PHONE BUSINESS PHONE EMAIL

***NEW MEMBERS ONLY:** SPONSORED BY (THREE FULL MEMBERS IN GOOD STANDING)

1. _____ 2. _____ 3. _____

BOARD OF DIRECTORS ACTION: ACCEPTED DECLINED DATE: _____