

Wollaston Yacht Club 2011 Application for Social Membership

Please send checks to
Wollaston Yacht Club
P.O. Box 109 Wollaston, MA 02170

<input type="checkbox"/> Renewal	<input type="checkbox"/> New
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Name _____	Date _____
Street _____	
City _____ State _____ Zip _____	
Home Phone# _____	Work Phone # _____
Occupation _____	
Employer _____	
Employer Street Address _____	
City _____ State _____ Zip _____	
DOB _____	Email _____
Emergency Contact _____	
Emergency Contact Phone # _____	
List any present or past Yacht Club Memberships _____	
Personal Reference _____	
Address _____	
Phone # _____	
Spouse's Name _____	
Names of children under 21 years of age _____	Dates of Birth _____
All members must serve on a committee. Please check your preference. <input type="checkbox"/> Entertainment <input type="checkbox"/> House <input type="checkbox"/> Other	
If elected, I agree to conform to the by-laws and Rules of the Wollaston Yacht Club.	
Applicant Signature: _____	
Sponsored by: _____	
(Please print member's name clearly.)	
<i>First Year's Dues must accompany this application and will be deposited after the final Executive Committee disposition.</i>	
Annual Dues: \$100.00	
New memberships are probationary for one year.	

For Wollaston Yacht Club Executive Committee Use Only	
Dues Amount Received _____	Date _____
Cleared by Treasurer _____	
<u>DISPOSITION</u>	
<input type="checkbox"/> This applicant is not approved by action of the Executive Committee.	
<input type="checkbox"/> This applicant was approved and elected at a meeting to the Executive Committee, held on: _____ (Date)	
Name of Chairperson _____	
Signature of Chairperson _____	