

APPLICATION FOR MEMBERSHIP

| Name of Applicant (Please write in block capitals) |
|---|
| Title (Mr., Mrs., Miss, etc.) |
| Full Name |
| Address |
| |
| Post CodeEmail |
| Date of Birth (If under 21) |
| Yacht Clubs of which Applicant is already a Member |
| Brief sailing history of Applicant |
| |
| Are any of your relations already members of the RWYC? (If yes, please state name and relationship) |
| Are you a boat owner? (If yes, please give details) |
| Signature of Applicant |
| Proposed for Membership (Name in block capitals) |
| (Signature) |
| Remarks |
| Seconded for Membership (Name in block capitals) |
| (Signature) |
| Remarks |
| Application Dated |
| |

Completed Applications for Membership should be sent to: james@pollockandcochrane.com or:

James Cochrane
Hon. Secretary & Treasurer
Royal Western Yacht Club
Pollock & Cochrane Ltd.,
Rowan Street, Paisley, PA2 6RT

Tel: 0141 889 2009