

BLUE MOUNTAIN LAKE CLUB, INC. MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name:

Current address:

City:

State:

ZIP Code:

How long have you lived at this address?

Date of birth:

Home Phone:

Cell Phone:

Email:

EMPLOYMENT INFORMATION

Current employer:

Employer address:

City:

State:

ZIP Code:

Position/Occupation:

EMERGENCY CONTACT

Name of contact:

Address:

Phone:

City:

State:

ZIP Code:

Relationship:

IF YOU WERE REFERRED BY A CURRENT BLUE MOUNTAIN LAKE CLUB, INC. MEMBER(S), PLEASE INDICATE WHO?

Name:

Name:

Name:

PERSONAL REFERENCES (WHO HAVE KNOWN YOU FOR AT LEAST 5 YEARS)

Name:

Phone or Email:

Name:

Phone or Email:

Name:

Phone or Email:

PLEASE LIST ANY OTHER OUTDOOR CLUBS OR ORGANIZATIONS YOU BELONG TO

Name:

Location:

Name:

Location:

SIGNATURES

I hereby apply for membership to the Blue Mountain Lake Club, Inc., and agree that should I be accepted into membership that I shall in no way violate any of the rules, laws, or bylaws for any reason. I agree to comply with the direction of the governing body of the Club. I certify that the answers I have given on this application are true and understand any false statements will lead to immediate forfeiture of membership and any fees paid and that I have read and accepted the Blue Mountain Lake Club, Inc. bylaws.

Signature of applicant:

Date:

Should you have any questions on the application process, please email or call Lou Thayer, President at thayer187@yahoo.com or 518-928-0032

Please mail signed application to:
Blue Mountain Lake Club, Inc.
Lou Thayer, President
187 Main Street
South Glens Falls, NY 12803

CLUB USE ONLY

Date Application Received:

Date Application Approved/Disapproved:

Name of Club Officer or Board Member reviewing this application:

Signature of reviewer:

Date: