

Membership Application:

1. Type of Members	ship: [] Family	1	
[] Married Couple	[] Individua	l w/Children	
[] Individual			
2. Name of Applicar	nt		
Name of Spouse			
3. Address			
Phone			
E Mail			
4. Names of Childre	n:		
		DOB	
-		DOB	
		_DOB	
8. Does Applicant	Own a Boat?	Power_	Sail
Make	Length		_Racing Sail
BoatC	lass	_Sail Number	
9. Name & phone	to contact ir	n case of emer	rgency:
Relationship			
10. Has applicant YesNoIf		y BYC functior	-

the Rules and Regulations of the Beachwood Yacht Club. Members resigning from the club will not receive any refund of dues, fees and bonds once this application has been signed. Signed: Signed: Date: Mail Application with \$250.00 application fee to: Beachwood Yacht Club/Financial Secretary c/o Kate Wiencke 22 Cedarwood Dr Toms River NJ 08755 As a member of the Beachwood Yacht Club, an obligation to volunteer to assist on at least 1 committee is requested. Please select one or more of the following: __ BAR BOATS & MOTORS ENTERTAINMENT HOUSE & GROUNDS SAILING PROGRAM WAYS & MEANS Date Received by Membership Committee: Ref: Annual Dues and Fees In Membership Book Membership Dues Social Entertainment Fee _____ Social Assessment Bond _____ BBYRA Dues Building Fund _____ The Membership Committee recommends that the Applicant be accepted for membership in the Beachwood Yacht Club. (Membership Chairperson or Designee)

Signed:_____

It is understood that the Applicant has filled out this application in good faith and will abide by