



Application for MEMBERSHIP



Insert picture

Date Submitted: _____

Name: _____
Last First Middle Nickname

Date of Birth: _____

Spouse/Partner: _____ Is Spouse/Partner a Crewe Member? ☐ Yes ☐ No

Home Address: _____
Street City State Zip

Cell Phone: _____ Email: _____

Please use personal email, not place of employment.

Employer: _____ Occupation: _____

Driver's License Number: _____ Yacht Club Affiliation: _____
State #

Your preferred method of communication from the Crewe is via email. We cannot guarantee you will receive all information by other means. Please indicate your preferred method of communication:

E-mail: _____ Phone: _____ Text: _____

CONSIDERATION FOR MEMBERSHIP: (Use additional paper if needed)

Why are you interested in joining the Crewe of Bobbie C. Davis?

The Crewe promotes itself as the "Sailingest Crewe in the USA!" Briefly list your sailing experience, interest and achievements. (however, no sailing experience is necessary)

Please list other attributes and expertise that you might contribute to the Crewe:

SPONSORSHIP (if applicable):

Name Address Email Phone

I hereby apply for membership to the Crewe of Bobbie C. Davis. I have read and agree to the bylaws. I have read and signed the membership Indemnity Release and Waiver Agreement attached hereto. In addition, I commit to represent the Crewe in a positive manner with the spirit by which we were founded.

Signature Date

Please email this form to cbcdpayments@gmail.com