

CATHLAMET YACHT CLUB

Membership Application

I/We hereby make application for ACTIVE / ASSOCIATE membership in the Cathlamet Yacht Club. (Please circle your choice.)

Applicant: _____

Co-applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Alternate address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Occupation: _____

Boat Make: _____ Length: _____ Power (☐) Sail (☐)

Boat Name: _____

Moored at: _____

I/We understand that the application must be completed, signed by two sponsoring members and submitted to the Cathlamet Yacht Club along with payment for initiation fee and annual dues (may be prorated). I/We understand that all applications are presented to CYC'S Board for voting at a regular Board meeting. If elected to membership I/We agree to comply with all By-laws, Regulations, Best Management Practices, three (3) hour annual work commitment and other rules of the Cathlamet Yacht Club that may now or hereafter be in effect and the Cathlamet Yacht Club Waiver, Release of Claims and Indemnity.

Cathlamet Yacht Club Waiver, Release of Claims and Indemnity

In consideration of Cathlamet Yacht Club (herein called "the Club") permitting me, my family, crew and/or guests to participate in the Club's events and to use its premises

(1) I hereby waive, remise, release and forever discharge the Club, its Board of Directors, Instructors, Members, Agents, Representatives and Employees from all and any claims, damages, liabilities, action, causes of action and costs, including attorney fees, existing at this time or at any time hereafter, arising out of participation of myself, my family, crew and/or guests in the Club's activities. (2) I hereby agree to indemnify and hold harmless the Club, its Board of Directors, Instructors, Members, Agents, Representatives and Employees from any of the above noted claims, damages, liabilities, actions, causes of action or costs made by me, my family, crew and/or guests including attorney fees. The above waiver, release and indemnity shall be binding upon myself and my heirs, executors and assigns. (3) I agree to provide and maintain at my own expense adequate insurance coverage for the risks normally associated with participation in the above matters.

Applicant Signature: _____ Date _____

Co-applicant Signature: _____ Date _____

SPONSORS

We CYC members recommend the above applicant(s) be accepted for membership in the Cathlamet Yacht Club.

Name: _____ Signature: _____

Name: _____ Signature: _____

Payment enclosed:

Initiation Fee	(\$ 75.00)	\$ _____
Annual Dues	(\$150.00)	\$ _____ (\$75.00 after July 1 st)
Burgee	(\$ 30.00)	\$ _____
Total		\$ _____

Please send the completed application and fees to:

CYC Secretary, Cathlamet Yacht Club
PO Box 665 Cathlamet, WA 98612

FOR CYC USE ONLY

Voted for membership: Yes _____ No _____ Date _____

Comments: