

Application for 2024 Family Membership

Name:	Address:
Phone:	Email:

I authorize the club to send invoices to the e-mail address provided _____ (initials)
 I hereby make application for a Family Membership in the Sarnia Yacht Club and enclose
 my cheque for \$_____ as payment.

Membership Dues \$ 495.98 + H.S.T \$64.48, Total: \$560.46 **Membership dues and any fees are non-refundable.**

This application is sponsored by _____, a current active member in good standing and
 requires a letter of reference.

Parent's name: _____

All SYC members are responsible for reading and following all club policies and rules. These rules exist so that
 you and your fellow-members can have safe & enjoyable experience when at your club.

I acknowledge that if approved for membership, I will read and follow all SYC policies and rules. _____(initial)

All SYC policies and rules can be found on the website at: **sarniayachtclub.ca** and in the annual SYC Roster
 which can also be found electronically on the website.

Conditions

The information below is for the use of the Yacht Club and **MUST** be filled out completely before your
 application is accepted. The reasonable costs associated with membership in SYC are maintained because
 members contribute their time and talents to the operation of the club. Please check the following work
 activities in which you would like to do in support of the club.

- | | | | |
|-----------------|-------------------|-------------------|------------------------------|
| Painting _____ | Launch crew _____ | Electrical _____ | General Labour _____ |
| Plumbing _____ | Mechanical _____ | Welding _____ | Small boat Maintenance _____ |
| Carpentry _____ | Cement Work _____ | Landscaping _____ | |

Profession/Occupation: _____

Members of the Family, interested in boating:

Spouse _____	Children _____	Age: _____
Children _____	Age: _____	Children _____
Children _____	Age: _____	Children _____
		Age: _____

I affirm that the information contained in this membership application is true and accurate.

Applicant's Signature: _____ Date: _____

*Office Manager must ensure that all information is completed before submission for Board Approval, including the
 letter of reference.*