

HAMMOND YACHT CLUB

731 Casino Center Drive

Hammond, IN 46320

(219) 659-9030

APPLICATION FOR MEMBERSHIP

We hereby recommend _____ the applicant,
Please print name
for Membership in the Hammond Yacht Club.

Recommended by: _____
Please print name *Signature*

Recommended by: _____
Please print name *Signature*

I, the undersigned, apply for Membership in the Hammond Yacht Club realizing that my name, residence, mailing address and occupation must be posted upon the bulletin board of the Club for ten (10) days and must thereupon receive approval of the Board of Directors, and if elected agree as follows:

I will endeavor to be a true seaman, alert, watchful, and always ready and eager to help my shipmates in the Club and other yachtsmen, especially when in distress. I shall govern my action, bearing and attitude by such a manner as will always reflect credit on the Club and the yachting fraternity, striving to uphold the best traditions of the sea. I will comply with the constitution, by-laws and house rules of the Club that are now or hereafter in effect.

Please choose one of the following:

() Full Member - one (1) voting privilege. Initiation Fee - \$500.00, Annual Dues - \$300.00

() Full Member with one (1) Full Family Member (spouse, son, or daughter) - two (2) voting privileges.
Initiation Fee - \$500.00, Annual Dues - \$335.00

Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone (_____) _____ Date of Birth _____

Occupation _____ Firm Name _____

Cell Phone (_____) _____ Business Phone (_____) _____

Email Address _____

() Spouse () Son () Daughter Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone (_____) _____ Date of Birth _____

Boat Name _____ () Sail () Power Year _____ Slip No. _____

Make _____ Model _____ Length _____

(Continued on reverse)

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What other clubs or organizations do you belong to? _____

Please list any board positions you have held or currently hold. _____

If you are interested in being a Member of a committee or in helping with a special event, please check the following.

- Facilities Committee
- Membership Committee
- Finance Committee
- Entertainment Committee
- Venetian Night/Weekend
- Rubber Raft Regatta

Please make check payable to **Hammond Yacht Club**

Applicant's Signature _____ Date _____

HYC use only

Received Date _____ Posted Date _____ By _____
Membership Director

Approved Date _____

Commodore

Secretary

Treasurer
