

**FULL**

APPLICATION FOR MEMBERSHIP



*Port Dover Yacht Club*

Box 668 ~ Port Dover, Ontario N0A 1N0  
519•583•0090



Please Print

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS  
STREET OR  
P.O. BOX \_\_\_\_\_

CITY  
OR  
TOWN \_\_\_\_\_ PROV \_\_\_\_\_ POSTAL  
CODE \_\_\_\_\_

TELEPHONE - BUS. \_\_\_\_\_ HOME \_\_\_\_\_

OCCUPATION \_\_\_\_\_

MARITAL  
STATUS \_\_\_\_\_ NAME OF  
SPOUSE \_\_\_\_\_ NO. OF  
CHILDREN \_\_\_\_\_

BOAT  
SIZE & MAKE \_\_\_\_\_

NAME OF BOAT \_\_\_\_\_ REGISTRATION  
NO. \_\_\_\_\_

SPONSORED BY  
2 MEMBERS \_\_\_\_\_

SIGNATURE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

PRINT \_\_\_\_\_ PRINT \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

**FOR CLUB USE ONLY**

MEMBERSHIP CHAIRMAN \_\_\_\_\_

DATE RECEIVED \_\_\_\_\_ INITIATION RECEIVED \_\_\_\_\_

DATE ACCEPTED \_\_\_\_\_ DUES RECEIVED \_\_\_\_\_

POSTING DATE UP \_\_\_\_\_ DOWN \_\_\_\_\_