



Shoreline Yacht Club of Long Beach

The Friendly Club

MEMBERSHIP APPLICATION FORM

For Office Use Only	Proposal Received _____	Fees Received _____	Membership No. _____
Check or CC _____	Check No. _____	Payment Date _____	Amount _____

Date: _____ Type of Membership (check one): Regular: ____ Shore: ____

CONTACT INFORMATION: (provide contact info for each individual)

Individual Member 1

Individual Member 2*

Name: _____	_____
Street Address: _____	_____
City/State/Zip: _____	_____
Home Phone: _____	_____
Cell: _____	_____
Email: _____	_____
Occupation: _____	_____

VESSEL INFORMATION: (if applying for Regular membership, please provide boat info)

Power/Sail: _____	Make: _____	Boat Name: _____
CF/Doc No.: _____	Length: _____	Beam: _____
Marina: _____	Slip No: _____	

ACTIVITY INTERESTS: (indicate interests of each individual member with 1 or 2 as appropriate)

<input type="checkbox"/> 4th of July Flap Jack	<input type="checkbox"/> Cruising	<input type="checkbox"/> Marketing Club Activities	<input type="checkbox"/> Sailing Foundation
<input type="checkbox"/> Awards	<input type="checkbox"/> Diving	<input type="checkbox"/> Membership Committee	<input type="checkbox"/> Social
<input type="checkbox"/> Boater Education	<input type="checkbox"/> Facilities	<input type="checkbox"/> Opening Day	<input type="checkbox"/> Teach Sailing Classes
<input type="checkbox"/> Book Club	<input type="checkbox"/> Fishing	<input type="checkbox"/> Predicted Log Racing	<input type="checkbox"/> Technology/Computers
<input type="checkbox"/> Casino Night	<input type="checkbox"/> Ham Radio	<input type="checkbox"/> Regalia	<input type="checkbox"/> Transpac Festivities
<input type="checkbox"/> Christmas Parade	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Sail Racing	<input type="checkbox"/> Whatever needed

As a volunteer-run club, Shoreline Yacht Club has need of many skills. I have the following skills, hobbies, knowledge or talent that I'd like to share with the Club: _____

I know the following Club members: _____

Other yacht clubs or boating organizations I belong to: _____

The extent of my boating experience is: _____

* Member 1 & 2 share equal interest in Membership

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I understand that should I be accepted into the membership of Shoreline Yacht club, I am to take an active interest in the Club and its activities, participate in the Officer of the Deck Program, pay all dues and assessments promptly and abide by the Club's Bylaws and established rules and regulations.

Signature Individual Member 1

Date

Signature Individual Member 2

Date

SPONSORS: (Obtain signatures of two Club members, before application can be considered)

One or both sponsors will present your application to the Board of Directors at the next regularly schedule Board meeting.

Sponsor 1

Mbr. No.

Sponsor 2

Mbr. No.

Interviewed by: _____ Date: _____ Comments: _____

Mail or deliver completed application together with all fees to:

Membership Chair
Shoreline Yacht Club
386 Shoreline Drive South
Long Beach, CA 90802

Make check payable to Shoreline Yacht club.

All fees due must be submitted with this form before your application can be presented to the Board of Directors and considered for approval.

email: office@syclub.org
phone: 562-435-4093

Signature Membership Chair

Board of Directors Approval Date

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Club Information Sent to New Member:

Welcome Letter _____
Card/Fob _____

Orientation _____
Name Badge _____

Shorelines _____
Burgee _____

Temp Card _____
Roster _____

New Member Information Sent to:

Webmaster _____
Directors _____

Shoreliners _____
Bookkeeper _____

Bar Manager _____
Committee Chairs _____

Dock Lines _____