



**Aransas Pass Yacht Club
Application for Membership**

No. _____

NAME _____ SPOUSE _____
(Should Membership be recorded in your name? ___ Both names? ___)

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

SPOUSE CELL PHONE: _____ OTHER: _____

E-MAIL ADDRESS: _____

SPOUSE E-MAIL ADDRESS: _____

OCCUPATION: _____ COMPANY _____

SPOUSE'S OCCUPATION: _____ COMPANY _____

Sponsored by: _____

BOAT INFORMATION (if applicable)

SAIL or POWER: _____ Length _____ MANUFACTURER _____

BOAT NAME: _____

COST OF MEMBERSHIP

Initiation fee:	\$300.00
Annual Dues:	<u>\$300.00</u>
TOTAL TO JOIN:	\$600.00

(If joining after January, dues are prorated at \$25 for the months remaining in the year.)

Please attach a check and mail it to:

Treasurer, Aransas Pass Yacht Club, P.O. Box 1935, Aransas Pass, TX 78335

I (We) the undersigned, agree that if elected to membership, I (we) will abide by the By-laws and Rules and Regulations of the Aransas Pass Yacht Club, and further agree to be responsible for the conduct and Club debts of any guest or minors I (we) bring to the Club. I (we) further agree to pay promptly all dues and charges that are incurred. I (we) understand that a delinquent Club account is grounds for revocation of membership. I (we) grant the Club permission to use the above information in the Club Directory and on the web site.

SIGNATURE: _____ DATE: _____

SPOUSE'S SIGNATURE: _____ DATE: _____