

MEMBERSHIP APPLICATION

Laguna Madre Yacht Club

PO Box 605, Port Isabel, Texas 78578

Initial Application Fee: \$100 Submitted with Application MEMBERSHIP # _____

Annual Dues: \$250 Prorated for the Calendar Month you are accepted as a Member

Your information/application will be posted for two weeks for review by the membership. You will be notified of the approval or disapproval of your application

NAME _____ BIRTHDAY MONTH _____ DAY _____

SPOUSE'S NAME (if applicable) _____ BIRTHDAY MONTH _____ DAY _____

HOME ADDRESS _____

CONTACT PHONE _____ E-MAIL _____

SPOUSE PHONE _____ E-MAIL _____

BUSINESS NAME _____

BUSINESS ADDRESS _____

BUSINESS PHONE _____ E-MAIL _____

BILLING ADDRESS _____

DO YOU OWN A BOAT? YES NO/NOT YET HAVE IN PAST SAILING EXPERIENCE

MAKE OF BOAT _____ BOAT NAME _____

I have Liability Insurance covering other boats or boat passengers with whom I might have an accident during a club sponsored boating event YES NO N/A

RECOMMENDED BY (1) _____
Signature of Member Membership # Phone

(2) _____
Signature of Member Membership # Phone

How did you find out about LMYC? Membership Team Brochures/Website Friend/Business Assoc
 Other _____

I hereby apply for membership in the LAGUNA MADRE YACHT CLUB. I agree to comply with and observe all rules, regulations, conduct codes and by-laws set forth by the Board of Directors (Flag Officers) as are now in force or may be hereafter adopted. Use of the yacht club facilities are for members and members guests when accompanied by the member. Memberships are non-transferrable.

SIGNATURE OF APPLICANT _____ DATE _____

For Office Use Only	Application and \$ _____ Received by _____ Date _____
	Date Approved _____ Signed _____