INDIVIDUAL MEMBERSHIP APPLICATION **CAPE CHARLES YACHT CLUB** PLEASE INPUT YOUR INFORMATION IN THE FORM FIELDS BELOW (Questions regarding this application – email BethCalder@gmail.com) Applicant Name: Date of Birth: (day/month/year): Email Address: Mailing Address: State: ZIP Code: City: Cell Phone: Home Phone: WATERCRAFT INFORMATION Boat Name: Length: Make: Sail/Paddle/Power: Marina: Slip: PLEASE NOTE THAT CAPE CHARLES YACHT CLUB IS DEPENDENT UPON ITS MEMBERSHIP FOR PROVIDING NECESSARY SERVICES THAT MAKE THE CLUB FUNCTION. WE ASK OUR MEMBERS TO VOLUNTEER THEIR TIME AND EFFORTS FOR VARIOUS CCYC ACTIVITIES. PLEASE INDICATE WHICH ACTIVITIES YOU ARE WILLING TO HELP WITH: Social Committee Weekend Cruises Small Boat/Kayaking Events Drink Committee Charitable Giving Road Clean-Up Club Photography **APPLICATION PROCESSING** THE INTRODUCTION OF APPLICANT AT AN EVENT BY ONE OF THEIR TWO SPONSORS IS REQUIRED BEFORE THE APPLICATION IS CONSIDERED COMPLETE. CONTACT YOUR SPONSORS WITH ANY OUESTIONS. SPONSORS MUST BE CCYC MEMBERS IN GOOD STANDING FROM TWO SEPARATE HOUSEHOLDS. Visit capecharlesyachtclub.com to view the Events Calendar Sponsor #1 Name: Phone: Sponsor #2 Name: Phone: Initiation Fee - \$150 (Fee goes into "Reserve Fund" for future capital expenses). **Annual Membership Fee** - The CCYC fiscal year is January – December. Initial dues are prorated based on which month the application is submitted and reviewed by the Board as indicated below (applications are reviewed monthly). Please check applicable box. ☐ Apr-June: \$67.50 ☐ July-Sept: \$45.00 ☐ ☐ Oct-Dec: \$22.50 Jan-Mar: \$90.00 Membership includes a CCYC Name Tag TOTAL FEES \$ _____ CHECK # ____

Please **Email** application to **BethCalder@gmail.com**

Date

Applicant's Signature:

Mail check payable to: Cape Charles Yacht Club, P.O. Box 145, Cape Charles, VA 23310