

YRYC MEMBERSHIP APPLICATION

Name:	·	
Spouse/SO:		
Names/Ages of Children under 18	3:	
Address:		
City/State/Zip:		
Phone Numbers: (H)	(W)	
(M)	(W) (Spouse/SO-M)	
Email:	Spouse/SO Email:	
Name of Boat:		
Boat Length/Maker/Type:		
Boat Location-Marina/Dock and S	ilip:	
As a member of YRYC, I would like	e to participate in and/or contribute to:	
RACE:	CRUISE	
Skipper	CLUBROOM	
Crew	MEMBERSHIP	
	PROGRAMS	
EDUCATION	SOCIAL	
CLUB OFFICER	FISHING	
OTHER:		
	S (PAST/PRESENT):	
Applicant's Signature/Date:		
Sponsoring Club Member's Signat	ture:	
Sponsoring Club Member's Signat	ture:	
YRYC Board Member Signature:		

Note: Current Yacht Club dues are \$200 per year and are to accompany the application. There is no initiation fee at present. Make checks payable to "York River Yacht Club". The club's mailing address is: P.O. Box 996; Gloucester Point, VA 23062. For further information contact webmaster@yryc.org.