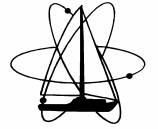


Port Canaveral Yacht Club

910 Mullet Road (P.O. Box 156)
 Cape Canaveral, Florida 32920
 321-784-2292



GENERAL MEMBERSHIP ?

SOCIAL MEMBERSHIP ?

OTHER ?

MembershipParticipants: (Two names unless applying as a single membership)

MEMBER INFORMATION

LAST NAME	FIRST NAME	SOCIAL SECURITY #
STREET ADDRESS	CITY/STATE	ZIP CODE
HOME PHONE*	OCCUPATION	E-MAIL*
BUSINESS PHONE*	EMPLOYER	OTHER PHONE OR E-MAIL*

Preferred Method of Noticiation: Email ? Telephone ? We have notices for events, menus, general updates, etc. that we e-mail or call members with. Please indicate your preference.

SPOUSE OR SIGNIFICANT OTHER INFORMATION

LAST NAME	FIRST NAME	SOCIAL SECURITY #
STREET ADDRESS	CITY/STATE	ZIP CODE
HOME PHONE*	OCCUPATION	E-MAIL*
BUSINESS PHONE*	EMPLOYER	OTHER PHONE OR E-MAIL*

Preferred Method of Noticiation: Email ? Telephone ? We have notices for events, menus, general updates, etc. that we e-mail or call members with. Please indicate your preference.

IMMEDIATE FAMILY MEMBERS	RELATIONSHIP

Please initial inside each box to agree.

- I acknowledge that I have received and read a copy of the PCYC Bylaws, House Rules, and Dock Rules along with a copy of the fee schedule. I agree to conform to all regulations and limitations listed herein.
- I hereby agree that PCYC can order my credit report and background check.
- Membership fees are payable in advance with the application. Club use fees and dockage are payable monthly.
- I understand that the Club may publish a directory (for Club and Club member use only) and give permission for inclusion in the directory.
- I understand that all boats must vacate the Port Canaveral Yacht Club when the Port Authority issues an evacuation order.

I accept this application for membership and agree to conform to the bylaws of this Club and comply with the obligations of membership. I agree to the terms in this

Applicant Signature #1 _____
Date

Applicant Signature #2 _____
Date

Sponsor Signature _____
Date

Board Approval By _____
Date

Have you ever been a member of another yacht club ? _____

Do you know someone at this Club ? If so who ? _____

How did you find out about us ? _____

COMMITTEE PARTICIPATION
(Please indicate 1st, 2nd and 3rd preference)

Committee	Member #1	Member #2
House – Building		
House – Grounds		
House – Bar		
Fleet – Racing		
Dockmaster		
Pier & Slips		
Programs and Entertainment		
Finance Membership		
Newsletter		
Public Relations		
Ways & Means		
Advertising		
Hospitality		
Reserve		
Sunshine		

For help in planning club activities, please tell us by circling which of the following activities interest you:

Racing Fishing Cruising Pleasure Boating Diving Social Picnics Raft-Ups

Please List specific skills that you have which you would be willing to use to benefit the Club:

Member #1 _____

Member #2 _____

If you own a boat, please complete the following sections:

Sail or Power **Make/Model** _____ **Year** _____

Power Boaters circle all that apply: **I/O** **O/B** **I/B Single or twin** **HP** _____

Hull Type: **Fiberglass** **Wood** **Aluminum**

Displacement: _____ **LOA:** _____ **Draft:** _____ **Beam:** _____

Vessel Name: _____ **Reg/Doc#** _____

Shore Power Requirements: **None** **100-125** **110-30** **110-150** **230**

IN CASE OF SEVERE WEATHER OR EMERGENCY, PLEASE CONTACT:

Do you wish to be placed on a slip waiting list? **Yes** **NO** **SLIP LENGTH DESIRED** _____

Will you accept a longer slip ?_ **Yes** **NO**

NOTE: LIVEBOARD SLIPS ARE LIMITED, NO GUARANTEE OF AVAILABILITY CAN BE MADE