



North East River Yacht Club
 80 Bayside Drive
 North East, Maryland 21901
 Phone (410) 287-6333 Fax (410) 287-6355

APPLICATION FOR LEGACY MEMBERSHIP

Applicant's Name: _____ Nick Name: _____ Marital Status: _____
 Address: _____
 City: _____ State: _____ Zip Code PLUS 4: _____ - _____
 Home Phone: _____ Work Phone: _____ Cell: _____
 E-mail: _____ Occupation: _____
 Spouse's Name: _____ Nick Name: _____
 Work Phone: _____ Cell Phone: _____ Other: _____
 E-mail: _____ Occupation: _____
 Member's Birthday: _____ Spouse's Birthday: _____ Anniversary: _____

CHILDREN

Name: _____ B/D: _____ Name: _____ B/D: _____
 Name: _____ B/D: _____ Name: _____ B/D: _____
 Name: _____ B/D: _____ Name: _____ B/D: _____

SKILL/TALENT BANK

What skills or talents do you or your family have that can be shared with NERYC?

Applicant: _____
 Spouse: _____

PARENT OR GRANDPARENT SPONSORS
(Must be a Full Member in Good Standing)

Name: _____ Name: _____

BOAT INFORMATION

Boat Name: _____
 Type: _____ Year: _____ Electric Amp: _____
 Builder: _____ Length: _____ Beam: _____ Draft: _____
 Dock/Mooring Location: _____ Registration/Doc #: _____

Note: If you are interested in a NERYC Slip or Mooring, please make a separate request to the Dock Master.

INTERESTS

What activities interest you at NERYC?

	Yes	No
Restaurant & Bar	<input type="checkbox"/>	<input type="checkbox"/>
Sail Racing	<input type="checkbox"/>	<input type="checkbox"/>
Cruising	<input type="checkbox"/>	<input type="checkbox"/>
Club Social Events	<input type="checkbox"/>	<input type="checkbox"/>
Junior Sailing	<input type="checkbox"/>	<input type="checkbox"/>
Volunteering	<input type="checkbox"/>	<input type="checkbox"/>

How did you learn about the club? _____

AGREEMENT / SIGNATURES

I / We, the undersigned, hereby apply for Legacy Membership in the North East River Yacht Club and agree to observe all rules and regulations if approved. I/We understand, as a Legacy Member, we have all Club privileges covered under Full Membership with the exception of: (1) voting privileges at all meetings of the Corporation on all matters requiring member approval and (2) the privilege of holding office in the Club. I/We also understand that a Legacy Membership must convert to a Full Membership in the following calendar year that the member attains the age of 30.

A check for the current Initiation Fee is attached. Upon approval, I / We agree to pay the remaining pro-rated dues amount. Payment for all charges may be by cash, check, or credit card at time of sale.

Signature of Applicant: _____

Date: _____

Signature of Spouse: _____

Date: _____

Signature of Sponsor: _____

Date: _____

Signature of Interviewer: _____

Date: _____