



# Miramar Yacht Club, Inc.

3050 Emmons Avenue, Sheepshead Bay, Brooklyn, N.Y. 11235

(718) 769 – 3548 • sail@miramaryc.com • miramaryc.com

## APPLICATION FOR MEMBERSHIP

Applicant's Last Name \_\_\_\_\_ First \_\_\_\_\_ Initial \_\_\_\_\_

Spouse's or Significant Partner's Last Name \_\_\_\_\_ First \_\_\_\_\_ Initial \_\_\_\_\_

Street (and Apt. #) \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

City, State \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_ Business Phone (\_\_\_\_) \_\_\_\_\_

Applicant's Date of Birth \_\_\_\_\_ E-Mail \_\_\_\_\_

Occupation or type of business \_\_\_\_\_

Children's Names and Ages \_\_\_\_\_

Proposed by: \_\_\_\_\_

Two References Other than Club Members  
1. Name and Address \_\_\_\_\_  
\_\_\_\_\_

2. Name and Address \_\_\_\_\_  
\_\_\_\_\_

All memberships are subject to applicable taxes.  
Members are required to contribute a minimum of 5 hours of service per year.

Name of Boat: \_\_\_\_\_ Type: \_\_\_\_\_ Length: \_\_\_\_\_ Beam: \_\_\_\_\_ Draft: \_\_\_\_\_ Weight \_\_\_\_\_

I hereby apply for membership in the **MIRAMAR YACHT CLUB, Inc.** Attached herewith is my check for \$ \_\_\_\_\_ as payment for the year. I understand that if I am not accepted by the Board of Governors my fee will be returned. I understand that any applicant accepted is a probationary member for the first year.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

In emergency call: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

(This section is for the Membership Committee.)

Interviewed by Membership Committee: Date \_\_\_\_\_ By \_\_\_\_\_

Board Action \_\_\_\_\_ Date \_\_\_\_\_