

COLUMBIA SAILING CLUB

APPLICATION FOR MEMBERSHIP

Name: _____ DOB: _____ Email: _____

Tel: _____ Cell: _____ FAX: _____

Home Address: _____ City, State & Zip: _____

Employer: _____ Occupation: _____

Business Address: _____ Tel: _____ Cell: _____

Marital Status: _____ Spouse's Name: _____ Email: _____ DOB: _____

Children (Name(s) & Birth Year): _____

Do you own a Sailboat? _____ Class of Boat: _____

If No, do you plan to purchase Sailboat? _____ Class of Boat: _____

If elected into membership, will you need an in-the-water slip for your boat or land parking place for trailer & boat? ___ If

Yes, state which and size of boat: _____

Resume of Sailing Experience:

Explain in detail why you are seeking membership in the Columbia Sailing Club?

(Attach additional pages if necessary)

Have you ever been a member of another sailing club? _____ (If Yes, Which one/dates) _____

Other civic and social clubs of which applicant is a member: _____

Explain in Detail special hobbies, talents or experience which may be of special help at Columbia Sailing Club.

Are you familiar with Columbia Sailing Club initiation fees and dues? Y / N

Please attach a photograph of the applicant, preferably a family photograph, and return this original application for membership to: David Mosley 124 Stockmoor Rd Columbia SC 29212 windzblowin@hotmail.com.

Applicants Signature: _____ Date: _____

Application Received by Membership Committee: _____ Published in TellTale: _____

Interviewed with Membership Committee: _____ Action by Board of Stewards: _____