Mystic River Yacht Club



Applicant Name:	Nickname:		
Spouse/Partner:	Nickname:		
Name & Age of any children living wa	ith you:		
Address:			
Street	City	State	Zip
Applicant Phone:	Email:		
Spouse/partner Phone:	Email:		
Applicant employer:		for	years
Spouse/Partner employer:		for	years
Boat owner: Yes No Bo	oating Experience:		
Yacht Club Affiliations:			
Boat Name:	Type: sail powe	er other _	
Boat Make:	Model:	LOA:	
Boat Beam: Draft:	Bridge/Mast Clea	arance	
What activities are you interested in at	t MRYC?		

- () Cruising () Family Sailing () Jr. Sailing
- () Boating Skills () Socials () Use of the pool

Would you be interested in joining any of our club committees?

- () Cruising () Publicity () Social () Education
- () Jr. Sailing () Membership () Clubhouse

On a separate piece of paper, please tell us a little about yourself, your family, your interests & your special talents and skills.

MRYC Sponsor _____ MRYC Sponsor _____

Feel free to call or email Bill Volmar with any questions: 860-460-7285 / bvolmar@yahoo.com. Please email your completed application and "bio" letter to Bill at the above email address.