

Mystic River Yacht Club



Membership Application

Date _____

Applicant Name _____ Nick Name _____

Spouse / Partner _____ Nick Name _____

Children Name+Age: _____

Home Address _____

Home City _____ State _____ Zip _____

Home Phone _____ Cell _____

Business Phone _____ Email: _____

Employer _____ service _____ yrs

Boat Owner? Yes _____ NO _____ Boating Experience _____ yrs

Yacht Club Affiliations _____

Boat Name: _____ type: sail _____ power _____ other _____

Boat Make: _____ Model _____ LOA _____ Sail# _____

Beam: _____ Draft _____ Bridge Clearance _____

What activities are you interested in at the yacht club?

Cruising Family Sailing Water Safety Education Socials Pool Activities

Would you have interest in joining any of our club committees?

Cruising Publicity Social Education Jr Sailing Membership Clubhouse

Please tell us a little about yourself, your family, your interests, & your special talents & skills in a one page letter.

First Sponsor _____ Second _____

Sponsors, Please mail this application along with your letters to the Club:

MRYC, Attn: Membership Committee | 90 Essex St | Mystic, CT 06355

If you have questions or need assistance with the application process contact:

Bill Volmar | 860-460-7285 | bvolmar@yahoo.com

3-2011