



Silver Gate Yacht Club

2091 SHELTER ISLAND DRIVE, SAN DIEGO, CALIFORNIA 92106 • 619-222-1214

Silver Gate Yacht Club Membership Application

Type of Membership: Flag Joint Flag Jr. Flag Joint Jr. Flag Associate Jr. Member

	Applicant	Spouse
First Name		
Last Name		
Address		
City, State, Zip		
Home Phone		
Cell Phone		
Email		
Occupation		
Name of Employer/Business Name		
Address		
City, State		
Work Phone		

	Primary Sponsor	Secondary Sponsor
Name		
Phone		

Boat Information: Year _____ Type _____ Make _____

Length _____ Beam _____ Name _____

Marina & Slip # _____

Why do you wish to join Silver Gate Yacht Club? _____

We place great emphasis upon participation in club activities. This is a great way to get to know other members and stay involved in the continued growth of the club. Mark at least three areas you are interested in participating by marking "A" for applicant, "P" for partner, and "B" for both. A committee chairperson will be in touch to explain the volunteer opportunities they have available for you.

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Finance | <input type="checkbox"/> Entertainment | <input type="checkbox"/> Long Range Planning | <input type="checkbox"/> Sail (Racing) |
| <input type="checkbox"/> Publications | <input type="checkbox"/> Membership | <input type="checkbox"/> By-Laws | <input type="checkbox"/> Power |
| <input type="checkbox"/> Fishing | <input type="checkbox"/> Trophy | <input type="checkbox"/> Live Aboard | <input type="checkbox"/> Internal Affairs |
| <input type="checkbox"/> Youth Activities | <input type="checkbox"/> Wheelchair Regatta | <input type="checkbox"/> Cruising | <input type="checkbox"/> Family Fleet |
| <input type="checkbox"/> Opening Day | <input type="checkbox"/> Junior Sailing Program | <input type="checkbox"/> Other _____ | |

Please list any other special training, education, talents, hobbies, etc. that you want us to know about you and/or your partner that would enhance your enjoyment of membership in SGYC.

Personal References <u>Other</u> Than Sponsors And Immediate Family Members			
	Reference #1	Reference #2	Reference #3
Name			
Address			
City, State, Zip			
Evening Phone			
Daytime Phone			
Relation to applicant			

Signature(s)

Date

Only complete applications will be processed when both sponsor questionnaires and a check covering half of the initiation fee are attached to it.

If you are applying for Flag, Joint Flag, Junior Flag or Joint Junior Flag, the Port Captain of SGYC must inspect your boat and documentation, such as proof of ownership and insurance, prior to your application being presented to the Board of Directors.

Note: Members may not live aboard their boats except on weekends and for short vacations unless they qualify for live-aboard status. Live-aboard status requires three full years of membership and the approval of the Live-Aboard Chairman.

FOR USE BY SILVER GATE YACHT CLUB ONLY

Check # _____ in the amount of \$ _____ attached

Bank verification ok? Yes No Date: _____

Sponsor #1 Questionnaire attached: Yes No Sponsor #2 Questionnaire attached: Yes No

Date Posted: _____

Date boat and documentation inspected by Port Captain: _____