

Green Bay Yachting Club

P.O. Box 485 Green Bay, WI 54305 (Mail) 100 Bay Beach Road, Green Bay, WI 54302 Telephone 920-432-0168

2024 APPLICATION FOR LIMITED FULL MEMBERSHIP

(Please Print)

Name					
Address	City			State Zip	
Phone Numbers:	Ony		·		
Home	Mobile		Work		
Date of Birth	🛛 Must ind	clude attach	ned copy o	of Drivers L	icense.
E-mail Address(s)					
Occupation (and/o	Veteran Y / N (circle one)				
Committees/activi	ties interested in participating				
Name of: Spouse	e				
Childre	en				
Emergency Conta	act Information:				
Name	Relationship		Ph	one	
Type of Boat $\frac{1}{(l)}$	Power, Sail) Boat N	ame			
Boat Length	Width	Mai	nufacturer _		
	(Note: Discounted ra	tes are <u>one ti</u>	me only for	<u>new membe</u>	ers only.)
ANNUAL I Sales Tax INITIATIO TOTAL DI	\$425.00 23.38 250.00	After 7/1 \$220.00 12.10	After 10/1		
Each extra	a gate card an additional \$10.00				
TOTAL DU	E Including Extra Gate Card(s)				_
Applicant's Signat		Date			
Member Sponsor		Date			
	FOR BOARD U	JSE ONLY			
APPROVED BY	BOARD OF DIRECTORS				_
GBYC Secretarv	Signature	Dat			
	hip Nr Gate				