



Green Bay Yachting Club

2026 Application for HARBOR LIFT

Lifts for boat purchases/sales and any other non-seasonal lifts are to be applied and paid for using this form.

This form should not be used for seasonal lifts included on the GBYC Winter Storage Application.

THE GBYC TRAVEL LIFT IS FOR FULL/FULL LIMITED MEMBERS ONLY BUT MAY BE REQUIRED BY NON-MEMBERS IN A NAUTICAL EMERGENCY.

<< Please print legibly! >>

REASON FOR LIFT _____ DATE _____

NAME(S) _____

ADDRESS

(For Non-GBYC Members Only)

Street _____ City _____ State _____ Zip _____

PHONE NUMBERS

Cell _____ Home _____ Work _____

EMAIL

The Green Bay Yachting Club uses email for club communications and invoicing. Please be sure to include at least one valid email address that you check regularly!

ABOUT YOUR BOAT!

Boat Name _____ Manufacturer _____ Length _____ Width _____

☐ Power? - or -

☐ Sail?

Comments/Notes _____

FEES DUE (Check all that apply)

☐ Lift-In for New Boat (one-time):
(\$3.50 + tax/Linear Foot)

	Price per LINEAR FOOT		Length of Boat in LINEAR FEET		Amount Due
\$	3.6925	x	_____	=	_____

☐ Lift-Out for Sold Boat (one-time):
(\$3.50 + tax/Linear Foot)

\$	3.6925	x	_____	=	_____
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☐ All Other Lifts*
(\$100 + tax/lift)

	Price per LIFT		Number of Lifts		Amount Due
\$	105.50	x	_____	=	_____

TOTAL DUE _____

*** One single lift payment entitles the applicant's boat to remain in the lift slings up to a MAXIMUM of TWO HOURS. It is considered a new lift -- and requires a new lift payment -- any time a boat comes out of the lift slings. Please contact the Fleet Captain with any questions in this regard.**

<< Please submit this application and payment in cash or by check to the bartender on duty or place in the mail slot of the club's office door. >>

☐ GBYC Members may check here to have an invoice emailed to you for online credit card payment. Per club rules, a credit card surcharge will be included. Emailed invoices for lifts will be Due Upon Receipt. Non-GBYC Members must pay via cash or check.

APPLICANT SIGNATURE

_____ Date _____

FLEET CAPTAIN APPROVAL

Printed Name _____ Signature _____ Date _____

FOR INTERNAL CLUB USE ONLY

DATE RECEIVED: _____

AMOUNT RECEIVED/CHECK NUMBER: _____

IF MEMBER TO BE BILLED, DATE INVOICE EMAILED: _____