



## HOB CAW YACHT CLUB LIFETIME MEMBERSHIP APPLICATION

Current membership Level:

- \_\_\_\_\_ Out of Town Member - Quarterly Dues
- \_\_\_\_\_ Regular Member - Quarterly Dues
- \_\_\_\_\_ Regular Member with Boat Slip - Quarterly Dues

New Membership Level:

- \_\_\_\_\_ Life Member- Quarterly Dues
- \_\_\_\_\_ Life Member with Boat Slip - Quarterly Dues

MR. MRS. MS. DR. PROF.

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

MR. MRS. MS. DR. PROF.

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

### LIFE MEMBERSHIP QUALIFICATIONS

**\*Any member who attains age sixty-five and has been a member in good standing for at least twenty years may advise or be nominated for election by the Board of Directors to life membership. Life members shall not be included in the membership limitation.**

YEAR JOINED: \_\_\_\_\_

CURRENT AGE: \_\_\_\_\_

I certify that the above facts are true to the best of my knowledge and belief and I understand that I subject membership status to disciplinary action in the event that the above facts are found to be falsified or intentionally misleading.

Signature \_\_\_\_\_

Date \_\_\_\_\_

\*Please allow four to five weeks to allow our Board of Directors to meet and verify all application information.

