



Lake Forest Yacht Club Inc
P.O. Box 844
Daphne, AL 36526



APPLICATION FOR MEMBERSHIP

(A \$15 non-refundable fee must accompany this application, must attend two functions)

Name: _____ Phone: _____
Last first middle

Address: _____ City: _____ State: _____ Zip: _____

Place of Employment: _____ Position: _____

Work Phone: _____ Cell Phone: _____ E-Mail: _____

Spouse Name: _____ Cell Phone: _____

Are you over 21: _____ Spouse over 21: _____

Minor Children

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Do you own a Boat? _____ Type: _____ Name: _____

What committees would you be interested in participating on?

Publicity/newsletter ___ Telephone ___ Entertainment ___ Membership ___ Fund Raising ___ House & Harbor ___

Other Hobbies or Interests: _____

LFYC Sponsor #1 _____ LFYC Sponsor #2 _____
(Sponsorship is required by two LFYCI members)

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Annual dues are: Regular Membership \$200.00

Application and fee received: _____ Date _____ Dues Paid: _____ Date _____ Application Accepted: _____ Date _____

Meetings or Functions attended: 1) _____ Date _____ 2) _____ Date _____

Membership Chairman Signature: _____