

Application for Membership

814-453-4931

P.O. Box 648

Erie, PA 16512

PRINT FULL NAME		apply for	membership in the SSOCIATE * JUNIOR FAMILY * JUNIOR		
	if alacted to mam		comply with the rules and regulations of the Club	5	
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ResidenceCity	St	ata	PhoneCell Phone Zip Code		
E-Mail			Date of Birth		
L-Mutt					
Name of Business, Profession or O	ccupation		Work Phone		
Business Address			Work Zip Code		
City	tyState		Work E-mail		
Spouse Name			Spouse Date of Birth		
Spouse E-Mail Address			Cell Phone		
Spouse Date of Birth					
Other Clubs you are a member of?	1.		2		
			No, if Yes, date resigned		
YACHT CLUB or its agents while a Member does not guarantee that I w	in the care, custody, corill be assigned a bertly of a suitable berth. I	or control of the ERIF h. I understand that a further guarantee tha	and all claims for damages to my property caused by the E YACHT CLUB. I further understand that my acceptance assignment of a berth for my boat is at the discretion of the lat I will not bring a boat into the ERIE YACHT CLUB basis	as a Dock	
Signature of Applicant		•	Date		
IMPORTANT - All questions mus	t be answered. Applic	cant must be sponsore	ed by two (2) members from these membership classes, ion will be filed with the Club Secretary.	_	
SPONSORS:					
			o members from these membership classes, by the Membership Committee concerning this applicant.		
Print	No	Print			
Signature	Date	Signature	Date		
FOR OFFICIAL CLUB	USE ONLY -	- Do not write	below this line.		
			embership Committee hereby certify that we have esented to the Membership and Board for election.		
Board Member			Date		
Board Member			Date		
Date elected to Membership: Revised 2/2022		Date Initiati	on Fee received:		