



The Haven Yacht Club

2020 MEMBERSHIP RENEWAL / APPLICATION FOR NEW MEMBERSHIP
(PLEASE PRINT CLEARLY - BOTH SIDES)

Captain: _____ Co-Captain: _____

Crew Members/Ages: _____

Address: Street: _____ PO Box #: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Home Fax #: _____

Captain's Cell Phone #: _____ Co-Captain's Cell Phone #: _____

Capt. Email Address: _____ Co-Capt. Email Address: _____

(CHECK HERE TO ALLOW US TO USE YOUR EMAIL TO SEND YOU VARIOUS CLUB COMMUNICATIONS)

Yacht Name _____ Power Sail Electrical Power Requirements _____

Length _____ Marina _____ Slip No. _____

OPTIONAL:

Cap't. Business Affiliation: _____ Co-Cap't. Business Affiliation: _____

Title or Description: _____ Title or Description: _____

Captain's Business Phone #: _____ Co-Captain's Business Phone #: _____

Captain's Business: Fax #: _____ Email Address: _____

Co-Captain's Business: Fax #: _____ Email Address: _____

THE HAVEN YACHT CLUB
2020 MEMBERSHIP APPLICATION
(Continued)

THE HAVEN YACHT CLUB IS A VOLUNTEER ORGANIZATION. OUR EVENTS CAN ONLY BE SUCCESSFUL WITH THE HELP OF OUR MEMBERS. PLEASE CHECK ANY OF THE FOLLOWING AREAS OR EVENTS THAT YOU ARE WILLING TO ASSIST OR PARTICIPATE IN AND A CLUB MEMBER WILL CONTACT YOU TO GIVE YOU ADDITIONAL INFORMATION:

- | | |
|--|--|
| <input type="checkbox"/> Social Activities Committee | <input type="checkbox"/> Safety/Education Committee |
| <input type="checkbox"/> Membership Committee | <input type="checkbox"/> Clothing Sales Committee |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Scholarship Committee |
| <input type="checkbox"/> Cruising Activities Committee | <input type="checkbox"/> Marketing/Advertising Committee |
| <input type="checkbox"/> Future Officer Candidate | <input type="checkbox"/> Future Governor Candidate |

I enclose my check or money order, payable to "The Haven Yacht Club" or "THYC":

RENEWING MEMBER DUES: \$ 100.00

OR

NEW MEMBERS DUES (Including a Burgee) \$ 125.00

In addition to my Dues, I wish to contribute to the Susan Scovill Memorial Scholarship Fund.
Amount added: _____

PLEASE RETURN THIS FORM ASAP TO ENSURE THAT YOU WILL BE INCLUDED IN THIS SEASON'S MEMBERSHIP DIRECTORY! FILL IN THE FORM AND MAIL IT ALONG WITH YOUR CHECK PAYABLE TO "THYC" TO:

The Haven Yacht Club
P.O. Box 603
Rock Hall, MD 21661

Check #: _____
Check Date: _____
Membership Card sent: Burgee Sent