

Membership Application ~ Starved Rock Yacht Club of Ottawa IL. 61350 P.O.Box 2346

Name: _____		Date of Birth: _____	Phone: _____
Address: _____		Cell: _____	
City: _____	State: _____	Zip: _____	Buisness: _____
			Fax: _____
E mail address _____			
Marital Status:	Single	Married	Couple
			Children at home
			Y or N
Occupation: _____			
Spouce's Name: _____		Date of Birth: _____	Phone: _____
Occupation: _____		Cell: _____	
		Buisness: _____	
Birthdate: Month and Day _____		E mail address _____	
Boat Name: _____		Dockage Location: _____	
Length: _____	Beam: _____	Type _____	Color _____
State of Boat Registration # _____ or Documentation _____			
Please present a copy of your State of Illinois Conservation Card for proof of ownership.			
Proof of Insurance on Craft if using the harbor _____			
What can you contribute to our organization ? _____			
What other boat clubs memberships do you currently hold ? _____			
Have you ever been convicted of a felony ?		Yes	No
Have you ever had a drug conviction?		Yes	No
If yes to either question please explain. _____			
I acknowledge and agree to the following:			
1. I have received a copy of the constitution and bylaws for the current year of the Starved Rock Yacht Club.			
2. I have carefully and thoroughly read the constitution and bylaws of the the Starved Rock Yacht Club.			
3. I understand the requirements of the constitution and bylaws of the Starved Rock Yacht Club and I agree, without reservation, to follow the documents.			
4. I plan to attend the meeting at which my membership will be proposed and introduction to my membership will be stated.			
Signature _____			Date _____
Sponsored by _____ and _____			