



POST OFFICE BOX 73  
ALLEN, MARYLAND 21810

<input type="checkbox"/> FEES PAID _____
<input type="checkbox"/> PUBLISHED _____
<input type="checkbox"/> DOOR CARD _____
<input type="checkbox"/> VOTED ON: ____/____/____
<input type="checkbox"/> PACKAGE SENT _____
<input type="checkbox"/> ADD TO MAILING LIST _____

## MEMBERSHIP APPLICATION

TYPE OF MEMBERSHIP  ASSOCIATE  FULL \_\_\_\_\_

APPLICANT'S FULL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

SPOUSE'S NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ SPOUSE'S EMAIL \_\_\_\_\_

BUSINESS \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ OCCUPATION \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

BOAT OWNER? YES \_\_\_\_\_ NO \_\_\_\_\_ SIZE \_\_\_\_\_ NAME \_\_\_\_\_

DO YOU WANT TO RENT A SLIP? YES \_\_\_\_\_ NO \_\_\_\_\_ (FULL MEMBERS ONLY)

COVERED \_\_\_\_\_ OPEN \_\_\_\_\_

## PLEASE PRINT

SPONSOR'S NAME \_\_\_\_\_ SPONSOR'S PHONE \_\_\_\_\_

THREE CLUB REFERENCES

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## IMPORTANT

1. YOUR SPONSOR, OR MEMBER REFERENCE MUST BE PRESENT AT GENERAL MEMBERSHIP MEETING IN ORDER FOR YOUR APPLICATION TO BE CONSIDERED. SAID SPONSOR, OR REFERENCE MUST BE A MEMBER IN GOOD STANDING.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



Wicomico Yacht Club  
P.O.Box 73. Allen, MD 21810

Thank you for your interest in the Wicomico Yacht Club, Inc.

- 1.) There is a \$50.00 Application Fee to be submitted with your application
- 2.) Associate (Social) Dues are \$500.00 per year and billed in March
- 3.) Full (Voting) Dues are \$700.00 per year and billed in November
- 4.) Your application must be published in the Creek News and voted on in the General Membership meeting on the second Monday of the month
- 5.) Sponsors of applicants **MUST** be in attendance of the General Membership meeting. Failure to do so will result in the applicant being tabled until the following month's meeting
- 6.) Your application must be submitted with the \$50.00 Application Fee and your pro-rated dues.

**\*\*To figure out your pro-rate, use the month you will be voted on:**

**ASSOCIATE PRO-RATE**

April- \$500  
May- \$458  
June- \$416  
July- \$371  
August- \$329  
September- \$287  
October- \$245  
November- \$203  
December- \$161  
January- \$119  
February- \$77  
March- \$35

**FULL PRO-RATE**

December- \$700  
January- \$641  
February- \$582  
March- \$523  
April- \$464  
May- \$405  
June- \$346  
July- \$287  
August- \$228  
September- \$169  
October- \$110  
November- \$51