

# Grand Lagoon Yacht Club Membership Application

<u>APPLICANT</u>		Date:		
Name:				
D.O.B.://				
Address (Street, City, State, Zip)				
(H) Phone:	Cell:			
Email				
Consent to emails/text alerts: Y				
SPOUSE/PARTNER				
Name:		Age		
Spouse/Partner Cell:				
Spouse/Partner Email:				
Consent to email/text alerts: Y N				
Children: (under the age of 18)				
First Name, Last Name				
1			Age	
2		<del>-</del>	Age	
3			Age	
4			Age	

## **EMPLOYMENT**

Employer:	Phone
Nature of Business:	Position:
# of years Spouse/Partner Employer:	Phone:
Nature of Business: # of years	Position:
Areas of Expertise (Circle Mem	ber/Spouse/Partner):
□Accountant/Finance/Investment	s-M/S/P
□Advertising/Marketing – M / S /	P
□Architect/ General Contractor/ Ir	nterior Design– M / S / P
□Attorney – M / S / P	
□Board/Committee Service (HOA	, PTA, City, etc.)-M / S / P
□Communications/ Technology/ \$	Social Media – M / S / P
□Development/Fundraising/Spon	sorship – M / S / P
□Event Coordinator/Planning – M	I/S/P
□Engineering – M / S / P	
□Govt. Affairs/City Official – M / S	S/P
□Real Estate/Commercial - M / S	/ P
□Videographer/Photographer – M	1/S/P
Other:	M/S/P
Other Organizations, Clubs, or Co	ommittee Affiliations:
	M/S/P

## **BOAT INFORMATION**

Vessel Name	<del> </del>
Length	Registration Number
Mooring Location	
Ramp Use	Dry Slip Wet Slip
CLUB OFFICE REC	ORD / DATES:
	_Application Received
	_Posted for Membership Review
	_Application Reviewed by Membership Committee
	_Interviewed by Membership Committee
	_Board of Governors Approval

Initiation Fees: \$806.25

Back Ground Check Fees: \$125.00

**MONTHLY** 

Monthly Dues \$107.50

### MINIMUM

A monthly Minimum of \$25.00 is required to be spent at the club on food or drink by each family.

#### **Boat Slips**

Dry Slips \$48.38

Wet Slips

East Slips \$150.50

West Slips (w/utilities) \$112.88

West Slips (w/o utilities) \$96.75

NOTE: The above fees include sales tax.