



San Jose Sailing Club

Application for New Membership

Skipper's name: _____ Home phone: () _____ Cell: () _____
 _____ Email: _____

1st Mate's name: _____ Home phone: () _____ Cell: () _____
 _____ Email: _____

Street _____ **City** _____ **State** _____ **Zip** _____
Child _____ Birth Year _____ **Child** _____ Birth Year _____
Child _____ Birth Year _____ **Child** _____ Birth Year _____

List any San Jose SC members you know: _____
 How did you find out about San Jose Sailing Club? _____
 Other Yacht Club(s)? _____ Member BOAT/US? ____ BOAT/US Member # _____
 MMSI # _____

| Boat Name | Builder | Model | Length | Year | CF# | Where Kept |
|-----------|---------|-------|--------|------|-----|------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | Amount <u>Due</u> | Amount <u>Paid</u> |
|--|----------------------|-----------------------|
| New Member Initiation Fee | \$40.00 | _____ |
| Annual Dues = \$50.00 (prorated for new members: Jan-Mar \$50.00/Apr-Jun \$37.50/Jul-Sep \$25.00/Oct-Dec \$12.50) | | _____ |
| Individual Junior Membership (applies only if parent is not a member) | \$5.00 | _____ |
| Optional Contribution (suggested amount) Recreational Boaters of Calif. (\$15 or \$20) | | _____ |
| Total Amount Enclosed | | \$ _____ |

I am interested in:

| | | |
|---|---|---|
| <input type="checkbox"/> Sailing SF Bay & Delta | <input type="checkbox"/> Boat & sail care | <input type="checkbox"/> Day sailing |
| <input type="checkbox"/> Cruising & preparation | <input type="checkbox"/> Racing & sail trim | <input type="checkbox"/> Dinghy sailing |
| <input type="checkbox"/> Outfitting & rigging | <input type="checkbox"/> Youth training | <input type="checkbox"/> Boat safety |

Club members are urged to take an active part in hosting, planning, or leading cruises, daysails, meetings, or other activities. Please do your share - check one or more boxes below.

- | | | |
|---|-------------------------------------|--|
| <input type="checkbox"/> Day sailing | <input type="checkbox"/> Cruises | <input type="checkbox"/> Meetings & programs |
| <input type="checkbox"/> Dinghy sailing | <input type="checkbox"/> Racing | <input type="checkbox"/> Web page/e-mail |
| <input type="checkbox"/> Youth sailing | <input type="checkbox"/> Training | <input type="checkbox"/> Club officer |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Membership | <input type="checkbox"/> Club treasurer |

Applicant's signature _____ Date _____

Make check out to **SJSC**. Mail check & form to: Paul Anderson, SJSC Treasurer
 450 San Luis Ave.
 Los Altos, CA 94024-4025