

**New Brighton Boat Club
PO Box 104
New Brighton, PA 15066**

Membership Application

Club Sponsor of Applicant: _____ Date: _____

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APPLICANT INFORMATION

Last name: _____ First: _____ Spouse: _____

Number of Children under 21 years of age living at home: _____

Name(s) of the owner(s) of the boat: _____
(If more than one and other than spouse, see last page for explanation)

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell phone(s): _____

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WATERCRAFT INFORMATION

Boat owner Yes___ No___

Manufacturer: _____ Registration Number: _____

Powered by: ___ Inboard ___ Outboard ___ I/O ___ Sail ___ Oar

Engine Manufacturer: _____ Outdrive Name: _____

Number of Engines: ___ One ___ Two Horsepower: _____ One _____ Two

Boat Length: _____ Feet - Inches Beam: _____ Feet - Inches

Boat's "Christened" Name: _____

APPLICANTS ACKNOWLEDGEMENT

If approved for membership in the New Brighton Boat Club, I understand that I will be considered a PROBATIONARY MEMBER FOR A PERIOD OF ONE YEAR. As a Probationary member, I will be entitled to full privileges of the club and its facilities with the exception of the right to vote, to nominate, or to be a candidate for office. After the probationary period, at the next regular meeting, I will be voted upon for a full membership. All fees paid during the probationary period are NOT refundable.

To remain a Member in Good Standing, it is understood that each member is expected to contribute a minimum of **15 hours** toward the maintenance of the clubhouse, docks and/or surrounding grounds. Also, each member will be expected to attend **at least 2 regular club meetings per year**. Additionally, Members in Good Standing will pay all fees and penalties (if any) prior to April 1 of each new boating season. **NB: Annual hours subject to change**

If approved for membership, I will do my best to adhere to the above expectations and **abide by all By-Laws** established by The New Brighton Boat Club Membership.

Applicant's signature: _____ Date: _____

References

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Please enclose the _____ initiation fee with this application.

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Vote on Probationary Membership

Date: _____

Approved _____ Denied _____

Commodore _____

Secretary _____

Membership Chair _____

Vote on Full Regular Membership

Date: _____

Approved _____ Denied _____

Commodore _____

Secretary _____

Membership Chair _____