



Dear Applicant,

August 11, 2015

The Seaford Yacht Club is pleased that you are considering membership in our club. Please complete the attached application and have it signed by two Club members who will be your sponsors. Applicants and their spouses or significant others count as one membership. Sponsors may not be members of the Club's Board of Trustees and/or their spouses or members on the Membership Committee. You must own a boat of at least 18 feet in length to be eligible for membership. The application (original and two (2) copies) accompanying fees and dues as described below, a brief biography about you and your family, and a recent photograph is to be mailed or given to your sponsor to present to the Membership Chair.

After appropriate processing, your application will be posted at the Club by the Membership Chair for a minimum period of 30 days spanning one dinner meeting. If no objections to your application arise, you will be presented for membership to the Board of Trustees. Before acceptance, we encourage you to attend at least two (2) Club functions. The Membership Chair will notify you upon acceptance. Should you be denied membership, your check for fees and dues will be returned to you.

The Club's initiation fee is \$1,000 and annual dues are \$385 for resident members and \$125 for non-resident members. A variety of options are available for paying the initiation fee.

**Option 1: Full Payment** - The initiation fee can be paid in full with the submission of your application.

**Option 2: Installment Payment Plan** – A first payment of \$350 must be made with the application. Installment payments of \$375 will be required one and two years from the date your application is approved. The total of all payments will be \$1,100 under this option.

**Option 3: Under 35 Member Policy** – Resident applicants under age 35 have the option of paying \$250 payable with the application. When the member turns 35, the balance of the initiation fee existing at the time he or she turns 35 will be assessed.

**Option 4: Legacy Members** – The initiation fee will be reduced by 25% for Resident Member applicants who are the children of current Resident Members.

**Option 5: Active Duty Members of the Armed Forces** - If you or your spouse is an active duty member of the Armed Forces, the Seaford Yacht Club will waive the initiation fee as long you remain on Active Duty. Once you go off Active Duty status, and wish to retain your membership in the Seaford Yacht Club, you have 30 days in

which to pay the current initiation fee to the Treasurer. The number of members of the Armed Forces that can join without paying an initiation fee is limited to ten members at any given time.

Select the initiation fee option that best meets your needs, and send a check covering dues for the current year and the initiation fee option you have chosen with your application. Dues for applicants accepted for membership after the start of the Club's fiscal year will be prorated on a monthly basis from the date of election, and the Treasurer will issue a check refunding the prorated amount.

Please mail your completed application and check to:

Seaford Yacht Club  
Membership Chair  
P.O. Box 1885  
Yorktown, VA 23692

Sincerely,

Nancy Hinman  
Seaford Yacht Club Membership Chair

1 Attachment: Application For Membership



# APPLICATION FOR MEMBERSHIP

Type of Membership: Resident  Non-Resident

Name \_\_\_\_\_ Phone: \_\_\_\_\_ Email \_\_\_\_\_  
First, Middle Initial, Last

Spouse/Partner Name \_\_\_\_\_ Spouse/Partner Email \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Spouse/Partner Cell Phone: \_\_\_\_\_

Address \_\_\_\_\_  
Street, City, State, Zip code

Employment, Position & Address (If applicable) \_\_\_\_\_

Employment, Position & Address – Spouse/Partner (If applicable) \_\_\_\_\_

Children(s) Names & Ages: \_\_\_\_\_  
\_\_\_\_\_

Hobbies & Interests \_\_\_\_\_

Initiation Fee Options (Resident Member applicants only – Check one)

- Option 1 - Full Payment** (Include \$1,000 with application)
- Option 2 - Installment Payment Plan** (Include \$350 with application)
- Option 3 - Under 35 Member** (Include \$250 with application)
- Option 4 - Legacy Members** (Include \$750 with application)
- Option 5 - Active Duty Military Members** (No fee with application)

### Volunteer Opportunities

SYC is a volunteer-led Club. Our members are our greatest asset. To jumpstart **your** participation in SYC, please choose from the following activities that might interest you and/or your spouse/partner. Chairs of those committees will contact you to get you started.

	<u>Member</u>	<u>Spouse/Partner</u>
<b><u>Boating Activities</u></b>		
Cruising	_____	_____
Racing	_____	_____
Volunteer Crew for Racing	_____	_____
Race Management	_____	_____
<b><u>Committees</u></b>		
Race Committee	_____	_____
House and Grounds	_____	_____
Landscaping	_____	_____
Dock	_____	_____
Monthly Dinners	_____	_____
Entertainment	_____	_____
Communications – Remembrance	_____	_____
Fleet Captains	_____	_____
Fundraising (e.g., SYC Clothing Sales)	_____	_____
The Semaphore - Newsletter	_____	_____

I (we) hereby apply for membership in the Seaford Yacht Club and agree to abide by its bylaws and policies. I (we) hereby agree to 1) pay initiation fees in accordance with requirements of the Seaford Yacht Club (outlined in the attached letter), and 2) pay dues for the current Club year. Dues are assessed according to the terms of Article XVII, Section 4 of the Club's bylaws and the attached letter.

\_\_\_\_\_  
Signature of Applicant                      Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Spouse/Partner                      Date \_\_\_\_\_

**Sponsors** (Applicant must be sponsored by two (2) club members per cover letter)

\_\_\_\_\_  
Sponsor's Signature                      Sponsor's Printed Name

\_\_\_\_\_  
Sponsor's Signature                      Sponsor's Printed Name

**Information for Fleet Captains**

**Type of Vessel:** ( ) Sail ( ) Power ( ) Gas ( ) Diesel

**Registration/Documentation No:** \_\_\_\_\_ **Vessel Name** \_\_\_\_\_

**Vessel Length** \_\_\_\_\_ **Water Line Length** \_\_\_\_\_ **Beam** \_\_\_\_\_

**Draft** \_\_\_\_\_ **Manufacturer** \_\_\_\_\_ **Year Built** \_\_\_\_\_

**Where Berthed** \_\_\_\_\_

**Do Not Write In This Space – For Official Use Only**

Officer (Signature, Date)	_____
Secretary (Signature, Date)	_____
Membership Chair (Signature, Date)	_____
Treasurer (Fee Received)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Board of Trustees Vote	Yes <input type="checkbox"/> No <input type="checkbox"/>
Function #1 Attended	_____ Date of Function _____
Function #2 Attended	_____ Date of Function _____
Attachments:	
Applicant's Biography	<input type="checkbox"/>
Photo of Applicant(s)	<input type="checkbox"/>
Initiation Fee & Dues	<input type="checkbox"/>