



# Cooper River Yacht Club

P.O. Box 70893, North Charleston, SC 29415

## MEMBERSHIP APPLICATION / RENEWAL FORM

### Personal Information

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Occupation \_\_\_\_\_ E-mail \_\_\_\_\_@\_\_\_\_\_  
 Day Phone (\_\_\_\_\_) \_\_\_\_\_ Evening (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_  
 Spouse \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Occupation \_\_\_\_\_ E-mail \_\_\_\_\_@\_\_\_\_\_  
 Day Phone (\_\_\_\_\_) \_\_\_\_\_ Evening (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_  
 Immediate Family Names \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Boat Information

Name \_\_\_\_\_ Make \_\_\_\_\_  
 Model/Size \_\_\_\_\_ Slip Number \_\_\_\_\_ Marina \_\_\_\_\_

### Qualifications & Experience (Include Licenses, Certifications, Class, Background, Etc.)

\_\_\_\_\_  
 \_\_\_\_\_

### What Activities Interest You? (Check all that apply)

( ) Sail Racing ( ) Sail Training (student) ( ) Cruising  
 ( ) Administration / Officers ( ) Sail Training (instructor) ( ) Socials

### Membership Committees

Throughout the year, we ask the general membership to help out with different functions.

Which of the following committees would you be willing to volunteer for? Check all that apply.

( ) Social ( ) Cruising ( ) Training ( ) Newsletter  
 ( ) Membership ( ) Scavenger Hunt ( ) Swap Meet

I understand that the success of the Club requires 100% involvement of its members. I agree to do my part as an active contributor to the work responsibilities of the Club. I understand that the Cooper River Yacht Club is not liable for any accidents or injuries that I, my family or any invited guest incur while participating in any CRYC activities.

(Signed) \_\_\_\_\_ Date \_\_\_\_\_

Sponsor #1 \_\_\_\_\_ Sponsor #2 \_\_\_\_\_

Please print & mail to above address with annual dues payment of \$30. and \$25.for CRYC Burgee