

APPLICATION FOR MEMBERSHIP

Name of Member:		Date of Birth: / /
Spouse:		
Phone No.:	E-Mail:	
Immediate family members un	der 25 residing	with applicant: (additional on reverse side)
Name:		Relationship:
		Relationship:
		Relationship:
DUES AND FEES CHECK FO	R \$436.00 MU	UST ACCOMPANY APPLICATION
		e to abide by the By Laws and House Rules of this club. Inay result in loss of membership or previously assigned
 dock space, rack, dinghy chain, locker s Application for membership does r Separate applications must be made All dues and fees will be paid by Fe 	space, and status on not guarantee dock to for all facilities. ebruary 1. lockers, dinghy ch	space. ain space, and racks) will be in use by June 15.
any reason, and I or my heirs, assigns, ethirty days of this termination, I then as Club free and clear of any claims by me	ten Boat Club is ter executors, or admin sign all right and ti e or my heirs and as	
I CERTIFY THAT I AM A RESIDENT OF THE TOWN OF DARIEN.		
Signature of Applicant:		Date:

RETURN TO: Darien Boat Club, P.O. Box 121, Darien, CT 06820