

WILD HARBOR YACHT CLUB
PO Box 1078
North Falmouth, MA 02556-1078

Membership Application
Please print or type

Name: _____ Spouse's Name: _____

Winter Address: Street: _____ PO Box: _____

City/Town: _____ State: _____ Zip Code: _____

Home Phone No: _____ Email Address: _____

Summer Address: Street: _____ PO Box: _____

City/Town: _____ State: _____ Zip Code: _____

Summer Phone No: _____ Email Address: _____

Children's name(s) and age(s)

_____	_____
_____	_____
_____	_____

Names of two club members proposing for membership:

_____	_____
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If accepted for membership, the undersigned agrees to comply with Wild Harbor Yacht Club's Constitution and Bylaws.

_____ Date: _____

Signature