



# Chapoquoit Yacht Club

## Legacy Membership Form

**Applicant Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

**Tel.#:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**e-mail:** \_\_\_\_\_

**West Falmouth Address:** \_\_\_\_\_

**P.O. Box** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Tel.#:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**July** \_\_\_\_\_ **August** \_\_\_\_\_ **Summer** \_\_\_\_\_

**Parent/Guardian information, currently a CYC member in good standing:**

**Parent/Guardian Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

\_\_\_\_\_ **Zip** \_\_\_\_\_

**Tel.#:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**e-mail:** \_\_\_\_\_

\*\*\*\*\*

**Enclose Junior (ages 22-29) Membership dues of \$50.00**, if applying between April and August. Dues will be billed to legacy members applying between September and March.

*To be completed by Membership Chair: Date Received* \_\_\_\_\_