

NIAGARA SAILING CLUB INC.
3619 East River Rd
Grand Island, NY 14072
716.773.2305

MEMBERSHIP APPLICATION

Membership Type Applying For: ___ Active ___ Social/Non Resident ___ Lifetime

Name of Applicant _____

Street Address _____

City _____ State _____ Zip _____

Home/Cell Phone _____ Business Phone _____

Email: _____

Occupation _____

Spouse Name _____

Children (Names) _____

Do you own a boat _____ If yes, what type: _____

Please state, in a few sentences, why you wish to join the Niagara Sailing Club.

Are you personally acquainted with other Members of the Niagara Sailing Club? _____

If so, please list them.

Have you met a least three (3) Directors of the Club? If so, please list them.

NSC Membership Application (cont'd)

The Niagara Sailing Club is limited in expansion of its membership. The following questions will aid the Membership Committee in its appraisal of your application.

1. Are you aware that there are scheduled work periods at the Club?

YES _____ NO _____

Will you be able to participate in work periods 0% _____ 25% _____ 50% _____ 75% _____ of the time?

2. Are you aware that the Club does have established class racing as well as handicap racing?

YES _____ NO _____

What degree of interest do you have in racing in these established classes?

None _____ Mild _____ Avid _____

3. Are you aware that the Club has social functions?

YES _____ NO _____

Will you participate in these functions 0% _____ 25% _____ 50% _____ 75% _____ of the time?

4. Are you aware that you will be asked to serve on Committees?

YES _____ NO _____

Will you serve, if reasonably possible?

YES _____ NO _____

Additional Remarks or Comments _____

Signature of Applicant _____

Signature of Sponsor #1 _____

Sponsor Name (Print) _____

Signature of Sponsor #2 _____

Sponsor Name (Print) _____

Mail or Deliver to: **Niagara Sailing Club
3619 East River Rd
Grand Island, NY 14072**

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New Applicant Sponsor Form

Member # _____ Member Name _____ Date _____

Dear Fellow Member:

Mr./Mrs./Ms. _____ has been recommended for membership in the **Niagara Sailing Club**. In order to insure that the applicant and the Club members are given all possible consideration, the following confidential information is requested:

Did you read and agree with the information on the application? _____

How long have you known the applicant? _____

How well do you know the applicant? _____

Is your contact with the applicant social, professional or other (please explain)? _____

Do you know of any of the applicant's friends or relatives whom you would consider objectionable as guests at the Club? _____

Have you sufficient knowledge of the applicant's character and reputation as to enable you to assume the responsibility for recommending membership in the **Niagara Sailing Club**? _____

Please comment on the applicant's standing in his/her profession, social life, and/or boating or sailing.

Sponsor Signature _____

Sponsor Name (Print) _____

While it is realized that the above questions are very personal in nature, it should be understood that the members of our Club must assume the relationship of a large family and that any addition to that family must be carefully considered so as to avoid embarrassment or disappointment to either the applicant or the membership.

Respectfully,

Chairperson Membership Committee

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How long have you known the applicant? _____

How well do you know the applicant? _____

Is your contact with the applicant social, professional or other (please explain)? _____

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Please comment on the applicant's standing in his/her profession, social life, and/or boating or sailing.

Sponsor Signature _____

Sponsor Name (Print) _____

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