



SHATTEMUC YACHT CLUB  
Westerly Road, PO Box 29  
Ossining, NY 10562  
Tel: 914-941-8777

Membership Committee  
Shattemuc Yacht Club  
P. O. Box 29  
Ossining, NY 10562

We, \_\_\_\_\_ and \_\_\_\_\_,  
Being Regular Members of Shattemuc Yacht Club, hereby introduce and sponsor the application of

(Please print name) \_\_\_\_\_

Date of birth

for a **JUNIOR** Membership in Shattemuc Yacht Club.

The applicant and his/her legal guardian certify that his/her true date of birth is \_\_\_\_\_ and that, if elected to membership by the Board of Directors, they agree to abide by the Bylaws and Rules of the Shattemuc Yacht Club. Enclosed herewith, or previously submitted [ ], is the sum of **\$596.07**, the dues for this year's membership plus New York State sales tax.

Signed, \_\_\_\_\_ date \_\_\_\_\_  
(Junior member)

Countersigned, \_\_\_\_\_ date \_\_\_\_\_  
(parent or legal guardian - required)

Please print parent's name: \_\_\_\_\_

Address: \_\_\_\_\_

Parent address (if diff.) \_\_\_\_\_

e-mail: \_\_\_\_\_ Parent e-mail \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Mobile: \_\_\_\_\_ Parent Mobile: \_\_\_\_\_

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**JUNIOR SAILING ACADEMY**

If elected to membership, I would like to apply to participate in the July  and/or August  session of the Junior Sailing Academy. I understand that the dues included with this application serve as a non-refundable deposit for application to the Academy, and that, additionally, full tuition is payable prior to attendance. More information is on the Junior Sailing Academy page of our web site.

My T-shirt size is \_\_\_\_\_ (Shirt included in Sailing Academy fee) Specify **C**hild or **A**dult size