



Smithtown Bay Yacht Club, Inc.

Box 562, Smithtown, New York 11787

631-584-9680

Membership Application

Name _____ Age _____ DOB _____

Home Address _____ Township _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Email _____

Business / Occupation _____

Spouse Name _____

Children's Name(s) _____ Age _____

Children's Name(s) _____ Age _____

Children's Name(s) _____ Age _____

Interests or hobbies _____

Club activities you would be interested in _____

Name of boat _____ Power _____ Sail _____

Make of boat _____ Length _____ Beam _____

Sponsored by _____ Sponsored by _____

Sponsored by _____ Sponsored by _____

The undersigned applicant for membership in the Smithtown Bay Yacht Club hereby agrees to abide by the Constitution and By-laws of the Smithtown Bay Yacht Club in the event of election to membership.

Applicant's signature _____ Date _____