



BREAKWATER YACHT CLUB, INC.
A Community Sailing Center

51 Bay Street, P.O. Box 2601, Sag Harbor, NY 11963 • www.breakwateryc.org • 631 725 4604

2012 MEMBERSHIP RENEWAL FORM & NEW MEMBERSHIP APPLICATION

Last Name _____ First Name _____

Last Name _____ First Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

Phone #s (____) _____ (home) (____) _____ (work) (____) _____ (cell)

E-mail(s) _____

*All event notices and your Membership card are sent by e-mail

Membership fees are tax deductible less \$25.00

- Lifetime Member**
- New Membership** ----- \$ **250.00**
 A \$250 one time assessment fee in addition to the yearly Membership fees will be charged for any new Individual, Family, Supporting or Sustaining Memberships or former Members who have let their member-ship lapse. This does not apply to Junior Members or those converting to Adult membership.
- Supporting Membership** - Annual Membership plus funding of 1 Jr. Scholarship ----- \$ **550.00**
- Sustaining Membership** - Annual Membership fee plus funding of 3 Jr. Scholarships **\$1000.00**
- Individual Adult Membership** ----- \$ **140.00**
- Family Membership** ----- \$ **275.00**
Family Membership is for two adults residing at the same address and includes children under 22. 1st name on application will be designated primary voting member when joining as a family.
- Junior Membership** (under 22 years old as of 3/1/12, non-voting) ----- \$ **30.00**

Last Name _____ First Name _____ Age _____

Last Name _____ First Name _____ Age _____

ADDITIONAL PRIVILEGES WITH ANNUAL MEMBERSHIP

(Not tax deductible)

- Dock Privileges**----- \$ **95.00**
 Boat Name _____ Model _____ Reg # _____
- JY15 Privileges**----- \$ **195.00**
- Catalina, JY 15 and Opti Privileges** ----- \$ **385.00**

I, the undersigned, hereby agree to be bound by the Breakwater Yacht Club Inc. ("the Club") By-Laws and all the rules and regulations of the Club both existing and/or hereafter duly adopted by the Club.

Signature _____ Signature _____

Date _____ Check _____ Pay Pal _____ TOTAL PAID _____