CORONADO CAYS YACHT CLUB

30 Caribe Cay Boulevard · Coronado, California 92118
(619) 429-0133 Office · (619) 429-8163 Fax

Date of Application: _____

Applicant Information

*I hereby apply for **Equity Flag, Equity Associate, Social, Military** Membership (circle one) in the Coronado Cays Yacht Club If approved for membership, I promise to abide by the* Constitution*,* By-Laws*, Rules and Regulations of the Club now in force, or which may hereafter be adapted.*

Applicant's Name:_____   Date of Birth:_____

Spouse/ Significant Other Name: _____   Date of Birth:_____

The terms "spouse", "husband and wife", "marriage" and "married couple" shall be deemed equivalent to "registered domestic partner" or "registered domestic partnership" as defined in current California Law. If unmarried, any club member may designate another adult person with whom he or she permanently dwells as such member's significant other and register the designation with the Club. By registering the Significant Other, the member agrees to assume all legal responsibility for the acts and charges incurred by that person. See front desk for registration form.

Residence Address:_____

Street	City	State	Zip
Home	Cell	E-Mail	

Years at present address:_____

(If less than 2 years)
Previous Address:_____

Street	City	State	Zip

Home Phone: _____Applicant's Cell # _____ Applicant's Email _____

Spouse/ Significant Other's Cell_____   Email:_____

TYPES OF MEMBERSHIP:

☐   Equity Members: Equity memberships may be either Flag or Associate. Equity members share ownership of all Club assets, have reciprocal privileges with other yacht clubs, may vote, hold office, and serve as a Club Director. They are subject to an equity buy- in, monthly dues, annual "use it or lose it" fees, and assessments (if any). Eligible to use marina. Please circle as applicable below:

☐ Flag (at least½ ownership in a boat)   ☐ Associate (non-boat owner)

☐   Social Members: are eligible to use all the Club facilities except the Marina and participate in all intra-club activities, but have no reciprocal privileges with other yacht clubs. They may not vote, hold office nor serve as a Director of the Club. Social membership affords prospective members a longer opportunity to decide whether they want to join the club on a more permanent basis as an equity member. Each Social Membership may be maintained for a period of not more than 12 consecutive months.

☐   Military Members: are ACTIVE duty military personnel of the US or allied countries. They have all the rights of Equity Members, except that they may not vote, hold office or serve as a Director of the Club. They are not subject to assessments or "use it or lose it" fees. There is no initiation fee and monthly dues are set by the Board of Directors. This membership includes reciprocal privileges with other yacht clubs.

Boat Information

Boat Name:_____ Manufacturer:_____ Class/Type:_____

Measurements: LOA:_____ Beam:_____ Draft:_____ Present Location:_____

Are you the sole owner of this vessel?   (Circle one)   Yes   No

If no, please explain: _____

Date of Application_____

Sponsored by Members: *Each prospective member must have 2 sponsors per the CCYC By-Laws.*

Member Name:_____ Member #:_____

Member Name:_____ Member #:_____

Employer Information

Employer Name:_____Business Phone:_____

Employer's Address:_____
                             Street   City   State   Zip

Personal Reference/Emergency Information

Reference Name:_____ Relationship:_____

Reference Address:_____ Phone:_____
                             Street   City/State   Zip

Credit Information

Social Security #:_____

Have you ever been convicted of a felony?   Yes_____No_____ If yes, please explain the
circumstances, charges, court where convicted, and year.
_____
_____

Any false statements made about an applicant's background can be grounds to void membership. Your signature authorizes Coronado Cays Yacht Club to obtain a credit report.

Applicant's Signature:_____Date:_____

Financial Information

Primary Financial Institution_____Checking Account #_____

Please check ____I DO ____I DO NOT wish to pay my monthly statement with the account listed above.

If you do wish to pay with the account listed above, please fill out the attached ACH form and attach a voided check.

Initiation Fee Payment / Credit Card Payment Authorization: If you wish you pay your initiation fee and monthly statement with a credit card (3% processing fee applies)

Account # _____EXP_____CVC_____

Signature_____Date:_____

_____

For Membership Committee/ Office Use Only (please do not write)
Approved for Membership (circle one) - Equity Flag – Equity Associate – Social – Military –

Membership Chairman: _____ Board of Directors _____