

Member #:

MEMBERSHIP APPLICATION



FEES & PAYMENTS

Initiation Fee	\$ 1500 _____
Monthly Dues	\$ 120.00 _____
Prorated Dues	\$ _____
First Month Dues	\$ _____
Prepaid Dues x _____ Months	\$ _____
Monthly Food/Beverage Requirement	\$ 100 _____

Total DUE \$ _____

PAID BY:

CASH/CHECK VISA/MC AMEX DINERS CLUB DISCOVER

Three-Day Cancellation Right. You, the buyer, may cancel this Agreement at any time prior to midnight of the third business day "excluding Sundays & holidays) of the Club after the date of this Agreement. To cancel this Agreement, mail or deliver a signed and dated notice which states that you, the buyer, are canceling this Agreement, or words of similar effect. Such notice shall be sent to Newport Beach Yacht Club, 1099 Bayside Drive, Newport Beach, CA 92660.

I have read, understand and received a COPY of this Application/Agreement, and the Release, Waiver of Liability Indemnification Agreement on the reverse side, as well as the Bylaws of the Club Agreement hereof. I agree to be bound by their terms and conditions. Please initial sections on reverse. Print name and sign below.

Print Name

Signature

Print Name

Signature

Buyer, Individually, And As Agent For Additional Members Listed Above.

Club Representative Approval

Signature/Name

Date of Agreement

Your Membership Begins On The Date The Membership Agreement Is Signed. Governing Law: This Agreement shall be construed in accordance with the laws of the State of California with jurisdiction and venue deemed proper in Orange County.

1. Name: _____
Last First M.I. Sex

2. Name: _____
Last First M.I. Sex

Home Address _____

City _____ State _____ Zip _____ E-Mail: _____

Home Phone () _____ Business

Phone () _____

Fax Phone () _____

Business Name _____ Profession _____

Business Address _____

City _____ State _____ Zip _____

Date of Birth _____ Drivers License # _____

Referring Member _____ Email _____

Emergency Contact _____

Home Phone () _____

Business Phone () _____

Membership Class: Regular Flag Corporate Non-Resident Honorary

How Did You Hear About The Club? _____
Corporate Affiliation _____ Send

Correspondence To: Home Business/Office

CREDIT CARD/ATM PAYMENT PROGRAM

CREDIT CARD # _____

EXPIRATION DATE _____ 3/4 Digit code _____

BANK NAME _____

NAME ON ACCOUNT _____

I agree the above listed information is correct I authorize the Club to make my monthly dues/payments from the above account. This authorization for automatic payments will remain in effect until I provide the Newport Beach Yacht Club with alternate banking/credit card information.

Member Signature