



QUANTICO YACHT CLUB

PO BOX 21

QUANTICO, VA 22134

www.QuanticoYC.org

MEMBERSHIP APPLICATION FORM

Name: _____ Date: _____

Spouse and Children Names: _____

E-Mail Address: _____ May we add you to our Google Group?
Yes No

Home Phone (____) _____ Work # (____) _____ Cell # (____) _____

Please check one:

Active Duty SSN: XXX-XX-_____ (last four ONLY, thank you)

Retired Service Branch: _____ Grade/Rate: _____

Civilian

Boat Name: _____ Boat Length: _____ Power or Sail? _____

Annual dues and renewing memberships are **\$150**, payable to QYC Inc. Fiscal year: 1 October through 30 September, each year. New members joining after 1 Jan prorate as follows:

Jan: \$135, Feb: \$120, Mar: \$105, Apr: \$90, May: \$75, Jun: \$60, Jul: \$45, Aug: \$30, Sep: \$15

Mailing Address: _____

_____ ZIP: _____

All members of private organizations participating in activities aboard Quantico are required by MCBO 7010.01A to sign a waiver of liability for themselves and any dependent children. By signing this form, I acknowledge and agree to all terms and conditions set forth in the QYC Waiver of Liability Document (available separately and posted in the QYC) and further acknowledge that I carefully read that document in whole and understand what I am signing.

Signature: _____

QYC USE:

Received By: _____

Added to Rolls: _____