



Membership Application

Date Filed: _____

ANSWER ALL QUESTIONS COMPLETELY (please print)

1. First Name _____ Middle Initial _____ Last Name _____
2. Home Address _____ City _____ State _____ Zip _____
3. Business Name & Address _____
4. Home Telephone () _____ Business Telephone () _____
Cell Telephone () _____ Email Address _____
5. Date of Birth _____ 6. Date of first Bayview Mackinac Race _____
7. Type of Boat Owned _____
L.O.A. _____ Beam _____ Draft _____
8. Yacht sailed on _____ Skipper _____
9. To what Yacht Clubs do you now belong? _____
10. Please complete race history on back of application.

I hereby state that I have personally sailed in Twenty-five (25) Bayview Mackinac Races and I request membership into the Bayview Yacht Club Society of Old Goats:

Signature _____ Date _____

Bayview Mackinac Race History

Year	Yacht Sailed
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____
16. _____	_____
17. _____	_____
18. _____	_____
19. _____	_____
20. _____	_____
21. _____	_____
22. _____	_____
23. _____	_____
24. _____	_____
25. _____	_____