Illiana Yacht Club Membership Application - 219-659-9602

Please print the application below and fill in the information. Mail the completed application enclosing a check or money order to: **Attn: Membership - Illiana Yacht Club, Inc. PO Box 662, Whiting, IN 46394.** If you wish to schedule an on-site visit email info@illianayachtclub.com for an appointment.

You will receive an email indicating that we have received your application within a week and what your likely status will be. Once your membership is accepted, you will receive additional documentation and a membership card in the mail along with several other pieces of information. Questions? Email us at info@illianayachtclub.com

Name:	Spouse's/Partner's Name:
Applicant's Birth Date:	Birth Date:
Address:	
Phone-Home ()	Cell ()
Email Address:	
Children under age 21 - Nan	ne, Month , Day & Year of Birth:
Employer (optional)	Address
Job Title or Duties (optional	<u> </u>
Special Skills / Hobbies /Inte	rests
Type of Boat(s)/Camper Owany)	ned & Size (if
understand that membership and functions, each member any reason, the Board of Go for the benefit of the Club wi property and any guests I/we activities and I/we assume al	tance as a member(s) of the Illiana Yacht Club I/we agree to abide the rules and by-laws of the club. I/we entails a commitment of service time and effort on my/our part in the support of Club maintenance, facilities contributes his/her fair share. I/we further agree that sixty (60) days after my membership terminates, for vernors is authorized to dispose of any of my/our property remaining on the Club premises as they see fit and the no responsibility to account to me/us. I/we also agree to assume all liability for myself/ourselves, all personal may bring to the IYC grounds and to hold harmless IYC, Inc. from any damages that may arise from said guests the responsibility for any damage or harm said guest(s) may incur while on the club premises. Upon acceptance wired to sign a liability waiver.
Date	Signed
Additional Signature if requi	red (Spouse-Partner)
Date applicants must be over 18 years of	Signed lage and all children over 21 must have a separate membership.
Date received by committee_	Membership Chairman
Date new member furnished	: Copy of By-Laws and Rules: Membership Card(s)
2015 Rates – Family Membe	rship \$325.00, Single Membership (1 person only) \$275.00, Usage Charge (per boat)

\$50.00 Annual Contingency Fee (\$65.00 – all members) *1 time Initiation Fee same as Annual Membership Fee

(Can be paid in installments). Ten hours authorized work mandatory per membership or subject to an additional \$50.00 Fee