

MULTNOMAH CHANNEL YACHT CLUB

MEMBERSHIP APPLICATION

Return to: MCYC Membership Committee
50990 Dike Rd.
Scappoose Or 97056

Name _____ Date of Birth ____ / ____
Spouse's Name _____ Date of Birth ____ / ____ (Month-Day)
Address _____ Anniversary ____ / ____
City _____ State ____ Zip _____
Occupation _____
Spouse's occupation _____
Phone (Home) _____ Work (His) _____ Work (Hers) _____
Cell (His) _____ (Hers) _____
e-mail (his): _____ e-mail (hers): _____

Children (under 18)

Name _____ Date of Birth ____/____/____
Name _____ Date of Birth ____/____/____
Name _____ Date of Birth ____/____/____

Boat Name _____ Make _____ Length ____ Type _____ Age _____

Other Hobbies or Talents: _____

*****All applicants for MCYC moorage must have a boat that meets MCYC guidelines and passes an inspection by the MCYC moorage committee or MCYC Board of Directors**

Applying for MCYC membership:

1. Applicant must meet with the MCYC Board initially before proceeding with membership
2. After Board meeting applicant must attend 1 regular club meeting and 1 club social function

Applicant must agree to the following 2 MCYC member requirements:

1. Participate in Opening Day each year with MCYC
2. Host or help with a Social Event each year

FEES DUE AFTER MEMBERSHIP ACCEPTANCE:

Initiation fee: \$125.00 Annual dues: \$225.00 Annual vouchers: \$60.00 per adult member

By signing this request for membership in MCYC I (we) agree to abide by all MCYC By-Laws and Rules and Regulations as stated in the current MCYC Roster.

Applicant Signature: _____ Date _____

MCYC Board interview date _____ Recommendation _____

Questions: Membership committee: Joe & Lynne Aten: 503-292-6993 or ldaten@msn.com