

## Royal St. Lawrence Yacht Club 1350 Lakeshore Drive Dorval, Québec, H9S 2E3

Phone: 514 631-2720, Fax: 514 631-2725 www.rstlyc.com

## **APPLICATION FOR MEMBERSHIP**

(PLEASE PRINT)

Candidate's full name: _			
Date of birth://_		E-mail:	
DD/MM/YY Spouse's name:			
Date of birth:/_/ DD/MM/YY		E-maii:	
Class of membership for	which the candidate	would be considered:	
☐ Senior ☐ Senior 3	0 ☐ Senior 25	☐ Intermediate	☐ Corporate
(+35) (34-30)	(29-25)	(24-18)	
I am the owner of a boats			
Type of boat:	☐ Power ☐ Sail ☐ Dinghy,Beam/Ft:Make:Year:		
-			
Home address:			
Telephone:		Fax:	
Name of company:			
Position/Occupation:			
Business address:			
Telephone:	Fax:	Email	
Website URL:			
Spouse			
-			
Name of company:			
Position/occupation:			
Business address:			
Telephone:	Fax:	Email	
Website URL:			
Please send all corresponde	ence:	<b>Office</b>	
Language of correspondence:			
How did you hear about ou	ır Club?		

## WAIVER OF LIABILITY

The owner, or prospective owner, hereby acknowledges that it is a condition of the use of the Club's harbor and premises, services or privileges that watercraft and other property personally owned by him or her, or ostensibly his or her property by reason of being in or on the harbor and premises at his or her invitation, with his or her acquiescence, or in his/her care, or watercraft operated by him or her although not his/her property, or in his or her custody (by bailment or otherwise) or control or in the harbor and premises of the Club are at all times at his/her own risk and that the Club and its employees do not incur any liability at law for loss or damages to such property for any cause whatsoever.

## PAYMENT AND AUTORISATIONS

I agree, if elected, to observe and be bound by the rules of the Club.

I understand that the RStLYC executive committee will grant me membership rights. One of these rights will allow me to terminate my membership at any time, with three months prior written notice. I must still pay any amounts owing on my account including a period of three months after reception of the official notice. Furthermore, I authorize the Club to charge any amount outstanding for 90 days along with an administration fee equivalent to 3% to my credit card registered in my file.

Signature of candidate \_\_\_\_\_\_ Date\_\_\_ Signature of spouse \_\_\_\_\_\_Date\_\_\_\_ NOTE: Whenever possible, each candidate for membership shall be proposed by a Senior or Intermediate member in good standing. Alternatively, if the candidate for membership is not known by, or does not know any such Club member, he/she may be required to furnish references from two persons having no family ties with the candidate, who could be contacted at the discretion of the Membership Committee. We, the undersigned, are personally acquainted with the applicant and recommend him/her for admission to the Club. To the best of our knowledge and belief, the applicant is of sound moral character. **REFERENCE REFERENCE** Name: Member no: Member no: E-mail: Telephone no:\_\_\_\_\_ Telephone no: ☐ Residence ☐ Office ☐ Residence ☐ Office Signature: Signature: