

# PORT CREDIT YACHT CLUB

115 Lakefront Promenade, Mississauga, ON L5E 3G6

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Tel: 905 278 5578

www.PCYC.net

Fax: 905 278 2519

**Application for \_\_\_\_\_ Membership**

Type of Membership

To: The Secretary, Port Credit Yacht Club

I, \_\_\_\_\_, hereby apply for membership of the

Name in Full

Port Credit Yacht Club. If my application is accepted, I hereby agree to abide by the Charter, By-laws, Rules and Regulations passed by said Club at any time I am a member thereof and pay all Fees and Assessments set by the Club in a timely manner. I also understand that privileges of the Club will not be available to me until I receive notice from the Club Secretary of the acceptance of my application, and if not accepted any monies attached hereto will be returned to me promptly.

Home Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Business Name & Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

E-Mail \_\_\_\_\_

License plate(s) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Profession \_\_\_\_\_

Previous Address \_\_\_\_\_

(If changed in the last five years)

Emergency Contact Info: Name \_\_\_\_\_ Telephone # \_\_\_\_\_

Name \_\_\_\_\_ Telephone # \_\_\_\_\_

I consent to, and accept this as written notice of the intention of the Port Credit yacht Club to obtain such factual and investigative information as permitted by law, pertaining to my credit background and subsequent credit experience, if applicable, and to retain such information for Port Credit Yacht Club's confidential use.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Membership Application (page 2)

### Spouse and Family Details

None \_\_\_\_\_

Name \_\_\_\_\_

Business Phone (\_\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ or same as applicant \_\_\_\_\_

Business name & Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_ License plate(s) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Profession \_\_\_\_\_

Number of Children \_\_\_\_\_ Jr. \_\_\_\_\_ Sr. \_\_\_\_\_ Univ. \_\_\_\_\_ None \_\_\_\_\_  
(Jr. is under 11 years)

### Junior Membership Applicants only

To be completed by the Parent or Guardian of all junior membership applicants.

I hereby guarantee payment of accounts incurred by the Applicant while a Junior member of Port Credit Yacht Club

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Membership Number \_\_\_\_\_

Please Print

If applicable

Home Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

### Proposer and Seconder

We, the undersigned, as members of the Port Credit Yacht Club, are personally acquainted with the applicant and recommend him/her for admission to membership.

Proposer \_\_\_\_\_ Membership Number \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Seconder \_\_\_\_\_ Membership Number \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: Only Senior and Associate members in good standing may act as Proposers and Seconders and at least one of them must be a Senior Member. The Proposer shall submit a letter in support of the application to the Secretary.

## Membership Application (page 3)

Please indicate below any previous Sailing/Boating experience you may have including any formal training, such as completion of The Canadian Power and Sail Squadron Course or The Canadian Yachting Association Training Programs.

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What are your anticipated uses of Port Credit Yacht Club; for example Family, Social, Business, Crewing, Racing or any other?

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Please provide us with any Boat Ownership information. Past, Present or Future.

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Do you anticipate being able to contribute (non-monetarily) to the activities of Port Credit Yacht Club?

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Please provide details, if any, of other past or present club memberships

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Would you be interested in a Mentor?

Yes \_\_\_\_\_ No \_\_\_\_\_

## Membership Application (page 4)

### Account Payment & Newsletter Information:

Send my monthly statement & newsletter by email \_\_\_\_\_

Desired method of payment of account (Mandatory)

Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Direct Debit \_\_\_\_\_ (include void cheque with application)

Card Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

I agree that all Food and Beverage charges on my Port Credit Yacht Club account will be charged to the above credit card or direct debit on a monthly basis. I also agree to inform Port Credit Yacht Club *immediately* of any changes to the above information; otherwise your signing privileges will be suspended until further notice.

**NOTE:** Payment for Annual Membership Dues, Summer Mooring, Winter & Summer Storage charges can only be paid by Cheque, Cash, Direct Debit or Online payment at your bank or financial institution.

Alternatively, should I choose to settle my food and beverage account by cheque, or online banking this payment must be received by the last day of the month or payment will be processed on your credit card.

If you choose to pay your account by online banking, please notify Debbie Roberts in our accounting Dept. 905-278-7911 ext 226 or memberaccounts@pcyc.net

**Note:** A \$25.00 charge will be incurred for any credit card decline, non-sufficient funds and returned cheques. Your signing privileges will also be suspended immediately.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

### Gate Security Card and Chit System Registration

I hereby authorize that my Spouse receives a Gate Security FOB and also sign Club chits. I agree to be responsible for all charges made by my spouse unless I notify the Club in writing to the contrary.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

All persons using the premises and facilities of the Port Credit Yacht Club do so at their own risk. The Club shall not be liable for any personal injury, death, loss of property damage or any costs whatsoever in any way resulting from such use, whether or not caused by the negligence of the Club, its employees, members or guests.

**Club membership does not necessarily include accommodation for a Yacht**

Comments \_\_\_\_\_

\_\_\_\_\_

**Membership Application (page 5)**

**Port Credit Yacht Club ('the Club")**  
**Joint Senior Membership Application**

Check one:

This is an application for a NEW Joint Senior Membership.

This is NOT an application for a new Senior Membership. It is an application to convert the existing Senior Membership of (print name) \_\_\_\_\_, membership number \_\_\_\_\_, to a Joint Senior Membership.

We the undersigned hereby represent and warrant to the Club that we are spouses of one another within the meaning of Part I or Part III of the Family Law Act of Ontario.

The two spouses who will share this Joint Senior Membership are:

\_\_\_\_\_, and \_\_\_\_\_.  
(Print name) (Print name)

The Joint Member who shall be responsible for all payment of all charges on the membership account by either of the Joint Members is:

\_\_\_\_\_  
(Print name)

If the Joint Membership is dissolved by notice to the Club pursuant to the bylaw, the joint member who shall be entitled to retain an individual Senior Membership is:

\_\_\_\_\_  
(Print name)

Signed:

\_\_\_\_\_  
(Signature) (Signature)

Date signed: \_\_\_\_\_