

MEMBERSHIP APPLICATION
CYPREMORT YACHT CLUB
P.O. BOX 11407
NEW IBERIA, LA 70562

NAME: _____ AGE: _____
SPOUSE'S FIRST NAME: _____ AGE: _____
HOME PHONE: _____ CELL PHONE: _____
ADDRESS: _____
OCCUPATION: _____
BUSINESS PHONE: _____
BUSINESS ADDRESS: _____
OTHER YACHT CLUB AFFILIATIONS (PAST & PRESENT): _____
CHILDREN NAME & AGE: _____
E-MAIL ADDRESS _____

IN ACCORDANCE WITH THE BY-LAWS, YOU MUST REGISTER YOUR BOAT(S):

SAILBOAT TYPE:
SLOOP___ KETCH/YAWL___ DAYSAILER___ MULTI-HULL___ BOARD BOAT___
HULL COLOR AND ACCENT STRIPE COLOR: _____
MANUFACTURER: _____ MODEL: _____ YEAR: _____
STATE OR COAST GUARD REGISTRATION: _____ SAIL NO: _____
AUXILIARY POWER TYPE AND H.P. :
INBOARD DIESEL___ INBOARD GAS___ OUTBOARD___
LOA: _____ LWL: _____ BEAM _____ DRAFT: _____
MAST HEIGHT ABOVE WATER _____
KEEL TYPE: SWING KEEL: ___ FIXED ___ CENTER BOARD ___
RADIO CALL SIGN _____
SAIL INVENTORY (MARK YES OR NO)
WORKING JIB (LESS THAN 110) _____ SPINNAKER _____
NO. 3 GENOA(110% - 130%) _____ CRUISING SPINNAKER _____
NO. 2 GENOA(130% - 150%) _____ STAYSAIL _____
NO.1 GENOA(151% - +) _____

POWERBOAT:
MANUFACTURER _____ MODEL _____ YEAR _____
STATE OR COAST GUARD REGISTRATION: _____
ENGINE(S) TYPE & H .P.: _____
HULL TYPE AND COLOR: _____ LENGTH: _____

ACTIVITY PREFERENCES: (A,B,C,):

CRUISING: _____ SOCIALS: _____ RACING _____

DO YOU WISH TO ENROLL YOUR CHILDREN IN THE JUNIOR SAILING PROGRAM? _____

DO YOU WISH A DRY _____ OR WET _____ BOAT STORAGE SLIP ? _____

DATE: _____

APPLICANT'S SIGNATURE

RECOMMENDED BY _____

CYC MEMBER

A CURRENT QUARTER DUES AT \$ 50.00/MO

PLUS A \$100 KEY DEPOSIT MUST ACCOMPANY APPLICATION.

A FULL REFUND WILL BE MADE IF APPLICATION IS DENIED.

A REFUND OF THE KEY DEPOSIT WILL BE MADE IF A MEMBER RESIGNS IN GOOD
STANDING.