

OCEAN GATE YACHT CLUB MEMBERSHIP APPLICATION

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Name _____ Spouse _____

Address _____ City _____

State _____ Zip Code _____ Phone _____

Summer Address _____ City _____

State _____ Zip Code _____ Phone _____

After June 15 send mail to my _____ winter or _____ summer address.

Children's names and ages:

1. _____ 2. _____

3. _____ 4. _____

I am interested in helping with the following activities:

Social Events Bartending Youth Activities Building/Grounds

Jr. Sailing Sunday Sailing BBRA OGYC Classic

Adult Sailing Showcase Membership House Keeping

Slip Rental Ground Space Sunday Coffee Yearbook

Please place a **Check Mark** next to the correct membership category below:

INITIATION FEE - \$295 (all categories except Young Adult)

FAMILY MEMBERSHIP - \$425 (includes full-time students under age of 22)

INDIVIDUAL ADULT MEMBERSHIP - \$300 (18 years and older)

YOUNG ADULT MEMBERSHIP - \$125 (age 18-27, Non-voting membership)

SENIOR MEMBERSHIP - (62 years and older)

INDIVIDUAL - \$125

COUPLE - \$175

Please make checks payable to the **Ocean Gate Yacht Club** and mail to:

**Ocean Gate Yacht Club
PO Box 347
Ocean Gate, NJ 08740-0347**