

**Gallipolis Boat Club, INC
PO Box 1092
Gallipolis, Ohio 45631**

Application For Membership:

Date: _____

Return Date: _____

Name: _____

Address: _____

City/State/Zip: _____

Phone: (Home) _____ **(Work)** _____ **(Cell)** _____

Please list two sponsoring club members:

Name: _____ **Years Known:** _____

Name: _____ **Years Known:** _____

Completion of this application and the members information form are the initial step in becoming a member of the Gallipolis Boat Club. A check in the amount of \$250.00 for the initiation fee, plus your first year dues of \$211.50, and sales tax of \$32.30 for a total of \$493.80 must accompany this application. This amount includes your initiation fee, your first year dues, and taxes. This amount does not include your slip fee. Incomplete applications will not be submitted to the Board for consideration.

Do you understand that you are only being considered for membership at this time and your acceptance as a member is contingent upon approval by the Board of Directors? ___Y ___N

You will be notified of the Boards decision as soon as your completed application has been approved or denied. In the event that your application is denied you will be refunded your check in the amount of \$493.80.

Do you understand that if your application is approved you will still be responsible to pay your slip fee? ___Y ___N

I agree to abide by all rules and regulations of the Gallipolis Boat Club and in the event that I do not, I understand that I will be subject to disciplinary action as described in the Member Handbook.

Do you understand that you can obtain a copy of the Member Handbook from the Gallipolis Boat Club's website www.gallipolisboatclub.net under the Member Handbook link? ___Y ___N

Applicant's Signature: _____

County Of: _____

Before me a Notary Public for the state of _____, appeared the above named who acknowledged he/she signed the foregoing instrument and his/her signing was of their free act: In testimony whereof, I have subscribed my name and affixed my seal this _____ day of _____ 20____

(PLEASE RETURN THIS COMPLETED APPLICATION TO THE DOCK MASTER, SECRETARY OR A BOARD MEMBER)