



# Sacramento Bayliner Club

## Membership Application

- Skipper's Name \_\_\_\_\_
- Birthday (Month and Day) (MM/DD): \_\_\_\_\_
- Address (Number and Street): \_\_\_\_\_
- City: \_\_\_\_\_
- State: \_\_\_\_\_
- Postal/ZIP Code: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
  
- First Mate's Name \_\_\_\_\_
- Birthday (Month and Day) (MM/DD): \_\_\_\_\_
- Address (Number and Street): \_\_\_\_\_
- City: \_\_\_\_\_
- State: \_\_\_\_\_
- Postal/ZIP Code: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
  
- Mascot Name(s): \_\_\_\_\_

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- Vessel Name \_\_\_\_\_
- Length/Beam \_\_\_\_\_
- Make/Model \_\_\_\_\_
- CF Number \_\_\_\_\_, or
- Documentation Number \_\_\_\_\_
- Berth Location \_\_\_\_\_

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By signing this application, you agree to follow the Sacramento Bayliner Club's By-Laws.  
**Please include your Declaration of Insurance for your vessel with this application.**

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

1<sup>st</sup> Sponsoring Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2<sup>nd</sup> Sponsoring Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_