

# KEAUHOU-KONA YACHT CLUB

## MEMBERSHIP APPLICATION



To: Applicant for Membership

Thank you for your interest in the Keauhou-Kona Yacht Club (KKYC). Attached are our application forms, which consist of the following:

- 1) KKYC MEMBERSHIP APPLICATION: to be completed by applicant(s)
- 2) KKYC Fees and Dues Statement
- 3) KKYC SPONSOR'S COMMENTS: to be completed by a KKYC member

All applications must be accompanied by a check for annual dues. Thereafter, annual dues are due by January 31<sup>st</sup> of every year. The Board of Directors of the Keauhou-Kona Yacht Club meets once per month. All membership applications are read at two consecutive Board meetings. The membership approval process is as follows: Upon submission of a completed application, the Membership Chairperson will present those names to the Board for a first reading. The list of prospective members will be published in the club newsletter and presented again by the Membership Chairperson at the next Board meeting for a second reading. If approved by the Board at the second reading, the applicant becomes a member of the club and a name badge is provided. Applicants may attend club activities at the member rate during the processing period (two Board meetings). All members and guests are required to wear badges or nametags at club functions.

Membership Chairperson: John Gallos. - Phone 419-290-5217 - email JG555@aol.com

PLEASE PRINT

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

NAME OF APPLICANT: \_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone numbers: Res: \_\_\_\_\_ Bus: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name to be printed on Badge: \_\_\_\_\_ Birthday month/day \_\_\_\_\_

Secondary Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phones: Res: \_\_\_\_\_ Bus: \_\_\_\_\_ Cell: \_\_\_\_\_

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NAME OF 2<sup>nd</sup> APPLICANT (If applicable): \_\_\_\_\_

Cellphone: \_\_\_\_\_ Email: \_\_\_\_\_

Name to be printed on Badge: \_\_\_\_\_ Birthday month/day \_\_\_\_\_

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Primary Recreational Interests: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for applying for membership: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

KKYC Committee Interests (Check all that apply)

(Special Events) \_\_\_\_\_ (Web Site) \_\_\_\_\_ (Communications) \_\_\_\_\_ (Membership) \_\_\_\_\_

(Golf) \_\_\_\_\_ (Party Set-Up) \_\_\_\_\_ (Finance) \_\_\_\_\_

## KEAUHOU\_KONA YACHT CLUB DUES

ANNUAL DUES: Annual dues are currently \$100.00 per person.

Total dues for applicant(s): \$ \_\_\_\_\_

PLEASE PREPARE CHECKS FOR ANNUAL DUES PAYABLE TO KEAUHOU-KONA YACHT CLUB.

MAIL COMPLETED APPLICATION AND CHECKS TO:

KEAUHOU-KONA YACHT CLUB

ATTN: MEMBERSHIP

P.O. BOX 1502

KAILUA-KONA, HI 96745

I (we) hereby apply for membership in the Keauhou-Kona Yacht Club and do agree to uphold the purpose of the club and abide by its rules and regulations.

1<sup>st</sup> Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

2<sup>nd</sup> Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

# KEAUHOU-KONA YACHT CLUB SPONSOR'S COMMENTS

This page must be completed by the sponsor and attached to the membership application when submitted to the Treasurer. PLEASE PRINT.

Name of Applicant(s): \_\_\_\_\_

Name of KKYC sponsor: \_\_\_\_\_

How long have you known the applicant(s)? \_\_\_\_\_

Please describe the nature of your relationship with the applicant(s) (business, social, personal, etc.)

\_\_\_\_\_  
\_\_\_\_\_

Reasons why you believe the applicant should be accepted as a member of the club:

\_\_\_\_\_  
\_\_\_\_\_

Additional comments: \_\_\_\_\_

\_\_\_\_\_

I recommend the above applicant(s) for KKYC membership.

Sponsor's Signature \_\_\_\_\_ Date \_\_\_\_\_

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FOR KKYC BOARD USE ONLY

Date 1<sup>st</sup> Reading: \_\_\_\_\_ Date 2nd Reading: \_\_\_\_\_

Accepted ( ) Rejected ( )

Membership No(s): \_\_\_\_\_ Certificate of Membership #: \_\_\_\_\_