



MEMBERSHIP & DOCKAGE INFORMATION

_____ DOCKING MEMBERSHIP _____ B MEMBERSHIP

DATE: _____

NAME: _____ SPOUSE'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

RESIDENCE PHONE: _____ BUSINESS PHONE: _____

BUSINESS ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

POSITION: _____

EMAIL ADDRESS: _____

EMERGENCY CONTACT: _____

RELATIONSHIP: _____ CONTACT PHONE NUMBER: _____

PERSONAL REFERENCES

NAME	ADDRESS	PHONE	AFFILIATION

NAME	ADDRESS	PHONE	AFFILIATION

NAME	ADDRESS	PHONE	AFFILIATION

WORK PARTY ATTENDANCE

➤ THE BEST TIME FOR PARTICIPATION IN A WORK PARTY WOULD BE:

SAT. _____ SUN. _____ WEEKDAYS _____ WEEKNIGHTS _____ OTHER _____

➤ ANY PHYSICAL PROBLEMS PREVENTING YOU FROM PARTICIPATING IN WORK PARTIES:

YES _____ NO _____ IF YES, PLEASE EXPLAIN _____

_____ I PLAN TO ATTEND TO OBTAIN MY WORK HOURS.

_____ I DO NOT WISH TO ATTEND; BILL ME \$20.00/HOUR. (20 Hours /MAX \$400.00)



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NEW MEMBER QUESTIONNAIRE

1. IS THIS YOUR FIRST BOAT? YES _____ NO _____
2. HOW LONG HAVE YOU BEEN BOATING? _____
3. WOULD YOU PREFER DOCKING IN A CHANNEL OR ON THE RIVER? _____
4. HAVE YOU BEEN A MEMBER AT ANOTHER CLUB OR MARINA? _____
5. DO YOU OWN A JETSKI OR DINGHY? YES _____ NO _____
6. IF SO, EXPLAIN: _____
7. DO YOU HAVE CHILDREN? YES _____ NO _____
8. IF YES, HOW MANY, AND WHAT AGES? _____
Note: If under the age 12, life jackets must be worn at all times, as dictated by State of Ohio law.

MARITAL STATUS: SINGLE _____ MARRIED _____

DIVORCED _____ PARTNERED _____
9. HOW WOULD YOUR NEIGHBORS DESCRIBE YOU AS A PERSON? _____

10. IF YOU ARE UNABLE TO ATTEND A MEETING, DO YOU WANT YOUR SPOUSE TO HAVE VOTING PRIVILEGES IN YOUR ABSENCE? _____
(If yes, please refer to Page 7 in this document.)

