

CLUB DE YACHTING ROCKCLIFFE DE ROCKCLIFFE YACHT CLUB

RYC Membership Application

This form to be turned in with non-refundable \$20 cheque Please fill-in the blanks as required

For the purpose of this application, if a Spouse / Partner is shown below, they will together represent one vote or one boat unit.

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Personal	m	to

	Surname	First Na	ıme	Spouse / Pa	artner	
	Address		City, Province		Postal Code	
	Home Phone	Work Phon	Work Phone Ce		il Phone	
	Email Address Personal				al Craft Operator Card #	
	How can you contribute to our club? Hobbies - Profession - Interests Date of birth dd / mm / yyyy					
Boat In	nfo					
	Boat Type	Boat Mal	Boat Make		Boat Model	
	Boat Name	Boat I	icence #	Colours		
	*Length Beam 1	Draft Request	for Boat Sto	rage	nmer Compound	
	Trailer Licence	Vehicle Licence Pla	Licence Plate Number		Dock slip Y N	
		D-N	V1		Mooring Y N	
	Boat Insurance	Poncy :	Number		Dry Sail Y N	

P.O. Box 44038, Ottawa, On K1K 4P8

^{*}length: maximum of 33 feet including protrusions fore and aft.

MEMBERSHIP AGREEMENT

CONDITIONS

- Membership and services are based on full season rates only.
- Services requested must first be approved by the RYC Board and must be paid in full before a boat is launched.
- Boat insurance with liability coverage as a minimum must be verified before a boat is launched.

AGREEMENTS

AS A CONDITION OF MEMBERSHIP, THE PERSON(S) NAMED ON THIS FORM REPRESENT ONE BOAT UNIT. AT LEAST ONE MEMBER OF THE BOAT UNIT AGREES TO:

- 1. PARTICIPATE ACTIVELY IN RYC WORK PARTIES:
- 2. PARTICIPATE IN DOCKS-IN AND DOCKS-OUT WORK PARTIES
- 3. PERFORM THE REQUIRED NUMBER OF MANDATORY SECURITY SHIFTS OR ARRANGE FOR A REPLACEMENT. WITH THE UNDERSTANDING THAT THE BOAT UNIT REMAINS RESPONSIBLE FOR THE PERFORMANCE OF THE SECURITY SHIFTS.

CERTIFICATIONS

- I/we certify that I/we carry personal liability insurance on the watercraft, trailer, and any
 other personal equipment that might be used on RYC controlled property. (See Policy No.
 on other side)
- I/we certify that all watercraft owned and/or operated by me/us from RYC facilities conform to Transport Canada safety standards.

CONSENT

I/we have read and understand the RYC Rules and Regulations, conditions of membership, the
above agreement and certification statements and will comply with them. I/we are aware that
non-observance or false certifications could bring revocation of membership.

I/we agree, disagr	ree to have my/our name and telephone numbers listed.
Applicants signature	Date
(Agreemen	nt is invalid without signature and date)
Spousal Partner signature	Date
(Agreemer	nt is invalid without signature and date)