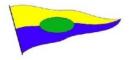


MEMBED INCODMATION

Cedar Island Yacht Club

982 Heritage Rd. P.O. Box 214 Kingsville, Ontario N9Y 2E9 519-733-2555



https://cedarislandyachtclub.ca

Thank you for your interest in Cedar Island Yacht Club. CIYC is a non-profit corporation under the Provincial Statutes of Ontario. The information below outlines membership privileges, responsibilities and application material.

FULL MEMBERSHIP APPLICATION

GIVEN NAME	Sl				
OCCUPATION	EMAIL	CELL			
SPOUSE'S GIVEN NAME		SURNAME			
OCCUPATION	EMAIL	CELL			
NTERESTS AND/OR SPECIAL SKILLS THAT MIGHT BENEFIT THE CLUB					
HOME ADDRESS					
	ODE				
	DME PHONE OTHER PHONES (opt.) BUSINESS				
NAMES & AGES OF CHIL	DREN LIVING AT HOME				
ADDITIONAL INFORMA	TION				
maintain a safe and naviga	ble channel from its docks to	It is the policy of the <i>Cedar Island Yacht Club</i> to the mouth of Cedar Creek and into Lake Erie. The ear and navigable channel throughout the season to			
How many years of boating experience do you have? Have you taken any boating courses?					
If you require a dock and/o	r boat storage, please provide	e the following information.			
Type: Sail Power _	Manufacture	Boat Name			
Length Be	eam Draft				
Name of Insurance Compa	iny	_ Name of Broker			

Policy No. _____ Amount of Liability _____ Expiration Date _____

Previous Dockage Location (Marina or Yacht Club):

Why you wish to join CIYC: _____

REFERENCES

CHARACTER REFERENCES - other than family members (include phone numbers)

a)					
h					

Note:

- 1. A Full Member is a person who signed the application form (including his or her spouse), has met the criteria of the application and has been met and accepted for membership by the Executive. It is understood that both spouses share a single voting membership.
- 2. Additional information can be found below under Membership Fees and Charges for the Season or in the Bylaws, Policies & Procedures **#8 Membership Fees and Charges for the Season**.
- 3. Please email your application to <u>secretaryciyc@gmail.com</u> or give to an Executive Member. Payment can be made by cheque payable to "Cedar Island Yacht Club or e-transfer to <u>payciyc@gmail.com</u>.
- 4. This application will be posted for 15 days for viewing by the members of CIYC.
- 5. For privileges and responsibilities of Full Membership, please review the Bylaws, Policies and Procedures #3 Full Member
- 6. All boat partnerships must be reported at the time of applying, and all partners must apply for membership.
- 7. Each Full Membership is responsible for performing 15 hours minimum of work per fiscal year.
- 8. As a member of CIYC, I acknowledge a two (2) year probationary period. During this period the Executive will review my standing and membership continuance based on my involvement in club functions, completion of work hours, meeting attendance, compliancy with all Club By-laws, Policies & Procedures and Code of Conduct. Failure to satisfy the above criteria will, at the Executive's discretion result in my membership being revoked.

Item	Amount per Year (Plus HST where applicable)	Additional Information
Full Member Fee	\$650	
Annual Dock Lease	\$45/foot	Based on the beam of the vessel
Winter Boat Storage with Mast	\$110	For one boat and mast
Cradle Storage	\$50	
Work Hour Fee	\$40/hour	Rate for unfulfilled work hours

Membership Fees and Charges for the Season

CLUB MENTOR

If you know a member of CIYC who is willing to mentor you, please include their name. If not, a member will be assigned to you as a mentor for the first year.

NAME _____

INDEMNITY AND LIABILITY CLAUSE

As a Member of Cedar Island Yacht Club, I agree to indemnify and save harmless CIYC, its officers and directors from any and all losses, claims, actions, damages, liabilities and expenses, including legal fees in connection with personal injury or death, property damage or any other loss or injury whatsoever (a) arising out of the use by the Member of the building, property, tools, equipment and facilities owned by CIYC (b) by the member's participation in any programs of CIYC (c) by the Member or any invitee of the Member or any other person permitted by the Member onto the building and property owned or controlled by CIYC.

CIYC shall not be liable or responsible in any way for any injury to any person or for any loss or damage to any property or building owned or controlled by CIYC howsoever the same shall be caused. I agree to strictly observe all rules and regulations of Cedar Island Yacht Club.

CANADIAN ANTI-SPAM LEGISLATION (CASL)

By signing the Statement of Commitment you agree to receive electronic communication (including invoices, messages, newsletters, etc.) to keep you informed about happenings at CIYC.

STATEMENT OF COMMITMENT

Signing this application indicates that I have read the above information and I hereby agree that I will adhere to the Bylaws, Policies and Procedures of Cedar Island Yacht Club which are available under "MORE" at https://www.cedarislandyachtclub.ca.

Applicant Signature _____

_____ Date _____

FOR EXECUTIVE USE ONLY					
Date application was received					
Posting period end date					
Date of executive approval					
Executive Signatures (minimum of four members)					
1	2				
3	4				
References checked	Info sent to Finance Team	Info sent to Dock Director			
Insurance Information Included	d on Application	Acceptance Letter Sent			
Information added to Roster Information added to Intro to E		Information added to Probation List			