



Jacomo Sailing Club 2010 Application Form

Jacomo Sailing Club 2010 Application Form				
LAST NAME	FIRST NAME	INITIAL	SPOUSES FIRST NAME	
HOME ADDRESS		CITY	STATE	ZIP
EMAIL ADDRESS		HOME PHONE #		
WORK PHONE #		CELL PHONE #		
NAMES OF CO-OWNERS		<u>MEMBERSHIP DUES</u>		
LIST OF BOATS YOU PLAN TO RACE		CHECK ONE ITEM – Due for application before August 1st.		
CLASS	SAIL #	<input type="checkbox"/> Racing membership \$120.00		
CLASS	SAIL #	<input type="checkbox"/> Junior Racing membership \$60.00		
CLASS	SAIL #	<input type="checkbox"/> Associate membership \$60.00		
APPLICANT SIGNATURE		<input type="checkbox"/> Junior Associate membership \$30.00		
DATE		Due for application made after August 1st.		
		<input type="checkbox"/> 50% off above dues for all memberships.		
I would like to help JSC and volunteer for the following areas; <input type="checkbox"/> Race Committee <input type="checkbox"/> Crewing <input type="checkbox"/> Junior Program <input type="checkbox"/> Entertainment <input type="checkbox"/> Open Sail Day <input type="checkbox"/> Training <input type="checkbox"/> Equipment <input type="checkbox"/> Club Promotions <input type="checkbox"/> Publicity				
Make check payable to Jacomo Sailing Club – Mail to: P.O. Box 22505, Kansas City MO 64113				