

# Polaris Sailing Society Membership Application



Annual Dues \$75

Please Print Clearly

Name (First & Last): \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Home Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Info 1  
Name / Relationship / Phone: \_\_\_\_\_

Emergency Contact Info 2  
Name / Relationship / Phone: \_\_\_\_\_

Birth Month / Birth Day: \_\_\_\_\_

### For Boat Owners Only

Will you make your boat available for Polaris events? Yes ( ) No ( )	Boat Name: _____		Sail?	Power?
	Boat Mfr. / Make: _____			
Registration CF or Doc. No.	Length:	Breadth:	Draft:	

The information on the application may be distributed to members of this organization. Our membership information is not approved to be shared with any other organizations.

Agree (Initial): \_\_\_\_\_

May the Club distribute your telephone number on the roster?	Yes: _____	No: _____
May the Club distribute your address on the roster?	Yes: _____	No: _____
May the Club distribute your e-mail on the roster?	Yes: _____	No: _____
May the Club use your Email for official club business?	Yes: _____	No: _____

I hereby acknowledge, understand, and agree to the Terms and Conditions as set forth in the attached Polaris "Assumption of Risk and Liability Release Agreement".

Agree (Initial): \_\_\_\_\_

Signature: \_\_\_\_\_ Date Joined: \_\_\_\_\_

Administration Use Only		
Paid by:	Cash	Check