



Membership Application: Englewood Sailing Association, Inc.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-mail: _____

Do you own a sailboat (Yes/No)? _____

Type: _____ Length: _____

Years of sailing experience: _____

Other sailing clubs/associations you have belonged to:

Are you certified to teach sailing? If "YES", by which authority:

Will you consent to a background check (Yes/No)? _____

Signature _____ Date _____

A membership fee of Twenty Five dollars (\$25) should accompany your application.

Please print this form, make check payable to: **Englewood Sailing Association, Inc.**
and then mail to:

Hugh Moore
1921 Scarlett Ave
North Port, FL 34289

Note: All applications must be approved by the Board of Directors prior to acceptance.
Membership fees will not be processed until approval is granted.