



Rehoboth Bay Sailing Association

Membership Application

		Fee schedule			Office Use Only
<input type="checkbox"/> New Applicant	Type	Initiation Fee	Dues	Appl. fee _____	
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Regular	\$675	\$450	Initiation fee _____	
	<input type="checkbox"/> Sustaining	\$950	\$450		
<input type="checkbox"/> Renewal	<input type="checkbox"/> Associate	N/A	\$645	Dues _____	
	<input type="checkbox"/> Junior	N/A	\$225	Recd _____	
<i>Check desired membership type at right.</i>	Trial			Sponsor _____	
	<input type="checkbox"/> Monthly	N/A	\$320	Registration Number _____	
	<input type="checkbox"/> Weekly	N/A	\$215		
	<input type="checkbox"/> Daily	N/A	\$45	Mem card issued _____	
All memberships (<i>except trial</i>) are contingent upon approval by the RBSA Board of Trustees					

Applicant's Name _____

Sponsor's Name _____

Please submit:

Completed application (*Page 1 & 2*)

To:

Club Manager or Board Member

Or to:

Membership Chairman
Rehoboth Bay Sailing Association
PO Box 483
Rehoboth Beach, DE 19971

I agree to observe and respect all published rules and regulations of the Rehoboth Bay Sailing Association.

_____/_____/_____
(Signature of applicant) (Date)

RBSA Member Information

Please provide all of the information indicated below. We recognize our obligation to protect your privacy. If there is any item of information that you ***do not*** wish to have included in the club roster, place a mark in the rightmost column for that item.

Spouse or Partner's Name		
Primary telephone number		
Alternate telephone number		
Cell phone number		
Pager number		
Email address		
Primary address Street City State Zip		
Alternate address Street City State Zip		
Boat Information Type Name Length		

Please list your children

(children's names do not appear in the roster)

Name	Date of Birth