



LWBC Application for Membership

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Occupation: _____ Spouse Name: _____
Children who will be using club: Name/Ages: _____

Is applicant a boat owner? YES ☐ NO ☐ Will you be requesting a boat slip? YES ☐ NO ☐
Type and size of boat? _____

Will applicant offer active support to the club by volunteering and participating in club functions? YES ☐ NO ☐ List any skills which would be of value to the club? _____

Has applicant taken boating safety courses? YES ☐ NO ☐ Why do you wish to join club? _____

Signature of applicant: _____ Date: _____

****It is required for all new applicants to attend a club meeting to introduce oneself before meeting committee will take a vote. Is this something you would be willing to do?**
Meetings are held every two weeks on Thursday night, 7:00pm. You may email Jennifer at JandJV@aol.com or call/text 508-612-6358 with questions concerning membership or boat club meetings.

OFFICE USE ONLY

DATE FILED: _____ DATE READ IN: _____

MEMBERSHIP COMMITTEE ACTION: _____

INTERVIEW/ ATTENDED MEETING: _____

VOTE: _____

WAIT LISTED: _____

Officer Signature: _____ Date: _____