



THE LANDINGS BOAT CLUB MEMBERSHIP APPLICATION

P.O. BOX 39264, FORT LAUDERDALE, FL 33339

WWW.LANDINGSBOATCLUB.ORG

APPLICANT INFORMATION

Name: _____
(Last, First)
 Spouse: _____ Home Phone: _____ Fax: _____
(First)
 Address: _____ Cell Phone: _____
 City: _____ State: _____ Zip Code: _____

EMAIL ADDRESS IS VERY IMPRORTANT!

Email Address: _____

BOAT OWNERSHIP IS NOT NECESSARY

Boat Name: _____
 Make: _____ Model: _____
 Length: _____ Beam: _____ Cruising Speed: _____

DUES

Initiation Fee: \$50.00 Enclosed _____
 Yearly Dues: \$100.00 \$ _____ Check Number: _____

I'D LIKE TO HELP WITH

Land Events? _____ Host Party? _____
 Water Events? _____ Plan a Trip? _____

(Please Circle)

CHILDRENS NAMES AND AGES (UNDER 18)

Name: _____ Name: _____
 Name: _____ Name: _____

Signature of Applicant: _____ Date: _____