Name: First Name		Middle Name	Last Name		
Partner's Name:	First Name	Middle Name	Last Name		
Address:	Street	City/Town	Province P	ostal Code	
Telephone:	Home	Cell	V	Work	
Email:		Occupation / Title:			
Do you own a boat docked within the headlands of Conception Bay?			No	Yes	
emailed to the RNYC General To digitally sign the form downl	ation Form is a PDF which can be di Manager Kathy Evans. load and open it using Acrobat Read				
	digitally signed the form, click SUBM mail account, or, you can save the co ssed to manager@rnyc.nf.ca.				
	rinted and mailed to the Club at the f	ollowing address:			
The Royal Newfoundland Yach P.O. Box 14160, Station Manue Conception Bay South, NL A1W 3J1					
OR it can be dropped off at the	office.				
	ceptance of your application. You car through the Membership Fee page o		Fee		
For more information call or email RNYC General Manager Kathy Evans T. 709 834 5151 E. manager@rnyc.nf.ca.			HST:		
			TOTAL:		

Applicant's Signature :

Date: