



DUN LAOGHAIRE MOTOR YACHT CLUB

Application for Membership of Dun Laoghaire Motor Yacht Club

Name: _____

Address: _____

Tel Home : _____ Mobile : _____

Email _____

Occupation: _____

Business Address: _____

_____ Tel : _____

Name, Class & Length of Boat (if any) : _____

Category of Membership applied for (Please tick box):

Ordinary Member	<input type="checkbox"/>	Crew Member	<input type="checkbox"/>	Junior Member (up to 19)	<input type="checkbox"/>
Family A (Spouse)	<input type="checkbox"/>	Shore Member	<input type="checkbox"/>	Country/Overseas	<input type="checkbox"/>
Family B (Spouse & Children)	<input type="checkbox"/>	Student Member (19-25)	<input type="checkbox"/>	Senior Member (+65)	<input type="checkbox"/>

Family B – Number of children and ages: _____

Junior / Student / Senior - Date of Birth: _____

Student - Full time Education College / Institute : _____

Signature: _____ Date: _____

To be completed by Proposer and Seconder :

Proposed By (please print) : _____

Signature : _____ Tel / Mob : _____

Seconded by: (please print) _____

Signature : _____ Tel / Mob : _____

Dun Laoghaire Motor Yacht Club, West Pier, Dun Laoghaire, County Dublin

Telephone : + 353 1 280 1371

E-Mail: office@dmyc.ie