



P.O. Box 46, New Castle, Delaware 19720

Membership Application

	Member Information	Spouse Information
First Name		
Last Name		
Nickname		
Phone (home)		
Phone (business)		
Phone (cell)		
Email		
Home Address		Will spouse be an active sailor?
		Will spouse attend instruction?

Names of Minor Children (under 21 years)	Birth date	Will children attend instruction?

Describe your previous sailing experience:
Do you and/or your family members know how to swim?
List any special skills you have that would help in maintaining club boats and facilities, or in club operations – for example, carpentry, fiberglass work, painting, welding, splicing, sail repair, accounting, gardening or cooking:
How (or from whom) did you learn about the club?

I hereby apply for membership in the *New Castle Sailing Club*. I will do my fair share of maintaining the club boats and facilities.

Signature _____ Date _____

Please print and mail to the club address or send as an attachment to: MemberNCSC@gmail.com