

TAMPA SAILING SQUADRON
PO Box 3277
Apollo Beach, FL 33572-1002

Initiation Fee Amount _____
Check#/Date _____
First Reading _____
Second Reading _____
Board approval _____
Annual Dues Paid _____

TAMPA SAILING SQUADRON MEMBERSHIP APPLICATION

Please print legibly.

Date of Application: _____ Date of Birth: _____

First Name: _____ Last Name: _____

Street Address (no PO Box) _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

First Name of Spouse: _____ Last Name of Spouse: _____

of Children at home: _____ Children - Names/Ages: _____

Occupation: _____ Spouse's Occupation: _____

Boat ownership is NOT required.

Boat Description: _____ Boat Name: _____

Registered Owner(s): _____

Insurer: _____ Policy #: _____

Registration: _____ LOA: _____ LWL: _____

Beam _____ Draft: _____ Keel Type: _____ Displacement/Weight: _____

Please write a statement about yourself and why you would like to become a member of TSS. Please be as specific as possible and use another page, if necessary.

You are invited and encouraged to become active and involved. Join in our races, cruises, youth programs, socials and work parties and lend a hand with the events and functions we enjoy. Our facilities, operations and programs are built and maintained by TSS members for TSS members. A proud TSS tradition calls this "sweat equity" in the Club. Your skills and interests are appreciated, and of value to our "self help" Club, so we ask you to list them here, so we can count on your help and participation. TSS is a working club and membership participation is required.

Please check the activities or committees you will become involved with, in addition to the monthly work party or other service to the Club.

Assist Dockmaster _____	Club House Maintenance _____	Grounds Keeping _____
Race Committee _____	Club Regattas _____	Cruising Committee _____
Small Boat Sailing _____	Women's Sailing _____	Youth Sailing Committee _____
Membership Committee _____	Covered Dish Dinner _____	Newsletter Committee _____
Safety Committee _____	Sea Scouts _____	Historian/History Committee _____
HAT Team (Hurricane Alert/Action Team) _____		Other _____

Please tell us about your skills. Some examples are construction, electrician, boatwright, rigger, sailmaker, sports official, secretary, software, webmaster, lawyer, architect, accounting, bookkeeping, communications, engineer, mechanic, medic, maintenance, insurance, sales, advertising, publicity, fundraising, technician.

Give your completed application, signed by your sponsors (2 TSS members in good standing), with a check for your initiation fee, to the Membership Chairperson, preferably at the regular membership meeting (third Monday, 7:30 p.m.), but in any event, before the Board Meeting (first Monday, 7:30 p.m.). The Membership Chairman ("MC") will notify the Board of your pending membership application and notify you of its acceptance by the Board. After your application is accepted by the Board, your initiation fee is nonrefundable.

We appreciate your interest in TSS and welcome your application for membership. It is our sincere desire that you understand the process and expectations during the application period. The MC will give you a Membership Process Checklist to chart your course. The MC, the Membership Committee, your sponsors and TSS members all wish you smooth sailing and will stand by to help you learn the ropes. When you have completed the membership process, the MC will present your Membership Process Checklist to the TSS Board of Directors for consideration. With the Board's approval, you will be invoiced for your annual dues, or pro rata share, and the Board's conferral of your TSS membership is effective upon your dues payment.

Sponsor (print name): _____ Signature _____

Sponsor (print name): _____ Signature _____

I hereby apply for membership in the Tampa Sailing Squadron. I have read and agree to abide by the Bylaws and the Rules and Regulations of the Tampa Sailing Squadron.

Applicant (print name): _____ Signature _____

Date _____