

TAMPA SAILING SQUADRON
PO BOX 3277
APOLLO BEACH, FL 33572-1002

- Original
 Secretary
 Treasurer

Check #/Date _____ / _____
Board Approval _____
First Reading _____
Second Reading _____
Board Approval _____

TAMPA SAILING SQUADRON MEMBERSHIP APPLICATION

Please Enter all fields and Click the Save As Button

Date of Application: _____ Date of Birth: _____

Applicant Name (First and Last): _____

Applicant Name Tag to Read: _____

Street Address (No PO Box): _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Co-Applicant Name (First and Last): _____

Co-Applicant Name Tag to Read: _____

Applicant's Occupation: _____ Co-Applicant's Occupation: _____

Children's Names/Ages: _____

Boat ownership is NOT required

Boat Description (year/make/model/name): _____

Registered Owner(s): _____

Would you like to subscribe to the Club's bi-monthly email "Connections"? Yes No

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 additional pages if necessary.

You are encouraged and expected to become active and involved in TSS. You are also expected to join in our races, cruises, youth programs, socials, work parties and lend a hand with the events and functions we enjoy. We are member owned, member run which means our facilities, operations and programs are built and maintained by TSS members for TSS members. This is a proud tradition TSS calls "sweat equity" in the Club. Your skills and interests are appreciated and of value to our member owned 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 parties or other service to the Club:

- | | | |
|--|---|--|
| <input type="checkbox"/> Assist Dockmaster | <input type="checkbox"/> Club House Maintenance | <input type="checkbox"/> Grounds Keeping |
| <input type="checkbox"/> Race Committee | <input type="checkbox"/> Club Regattas | <input type="checkbox"/> Cruising |
| <input type="checkbox"/> Small Boat Sailing | <input type="checkbox"/> Women's Sailing | <input type="checkbox"/> Youth Sailing |
| <input type="checkbox"/> Membership Committee | <input type="checkbox"/> Covered Dish Dinners | <input type="checkbox"/> Newsletter Assistance |
| <input type="checkbox"/> Bookkeeping Assistance | <input type="checkbox"/> Sea Scouts | <input type="checkbox"/> Website Assistance |
| <input type="checkbox"/> HAT (Hurricane Action Team) | | |

Please tell us about your skills. Some examples are: construction, electrician, boatwright, rigger, sailmaker, sports official, secretary, software, webmaster, lawyer, architect, accountant, bookkeeping, communications, engineer

Email your completed application to Membership@sail-tss.org. The Membership Chairperson (MC) will respond with instructions to submit the proper initiation fees. The MC will notify the Board of your pending application at the next Board meeting (1st Monday of the month). The sponsors and applicant will then be notified that the application has been accepted by the Board. **Once your application has been accepted by the Board, your initiation fee is non-refundable.**

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. **Page three of the application is the *Membership Process Checklist*; use it to chart your course through the application process.** The MC, the Membership Committee, your sponsors and the 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. Once the Board approves your membership you will be invoiced for your annual dues, or *prorate* share. **The Board's conferral of your TSS membership is effective upon payment of required fees.**

Sponsor (type/print name): _____ Signature: _____

Sponsor (type/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: _____

Tampa Sailing Squadron, Inc. (TSS)

Membership Process Checklist

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- 1) Email your completed application to Membership@sail-tss.org. The Membership Chairperson (MC) will respond with instructions to submit the proper initiation fees. The MC will notify the Board of your pending application at the next Board meeting (1st Monday of the month). The sponsors and applicant will then be notified that the application has been accepted by the Board. **Once your application has been accepted by the Board, your initiation fee is non-refundable.**

MC Initials/Application Received: _____ Date: _____

- 2) Applicants are required to participate in a casual interview with the Membership Committee. You can either 1) attend one of the 'pre-meetings' before the monthly General Membership meeting, or 2) schedule an interview with the MC. At the interview we will answer your questions about the membership process, advise and assist you as necessary, tell you about TSS history and convey the expectations and goals TSS holds for its membership.

MC Initials/Interview: _____ Date: _____

- 3) As an applicant you must be present at two regular General Membership meetings with one, or both of your sponsors, who will introduce you to the membership. TSS tradition calls these introductions your 1st and 2nd Readings.

MC Initials / 1st Reading: _____ Date: _____

MC Initials / 2nd Reading: _____ Date: _____

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No experience or boat ownership is required. Your skills and interests are appreciated and of value to our "self-help" Club, so we ask you to list them on the application form. Applicants are required to assist in a minimum of two different official TSS activities. The MC or an Officer, Director, Membership Committee member or activity leader will complete the section below indicating your participation.

Activity 1 Description:

MC or Authorized Signature / Activity 1 Completed: _____ Date: _____

Activity 2 Description:

MC or Authorized Signature / Activity 2 Completed: _____ Date: _____

Applicant: _____ Membership Chairperson: _____

Board Approval: _____ Date: _____