

## **Application for Membership**

<b>Membership Categ</b>	ory Requeste	ed (check one):	
Individual Gold Couple Gold	Family Gold	Brass Marina Corporat	te Corporate Silver Legacy
Referred by:			
Primary Member N	lame		
(Last)	(F	irst)	(Middle)
Mobile Number		Email	
Date of Birth	Driver's License Number		
Home Address			
Home Phone	Cell Phone		
Company Name		Occupation	
Office Phone			
Spouse or Partner	Name		
(Last)	(First )		(Middle)
Mobile Number	Email		
Date of Birth	Driver's License Number		
Company Name	Occupation		
Children (Under th	e Age of 18)		
Name	DOB	Name	DOB
Name	DOB	Name	DOB
Primary Me	mber Signature		Date

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## **Getting To Know You Preferred Method of Communication:** Home Phone Work Phone Mobile Phone Email Text Mail Do you use any of the following? (check all that apply) Facebook Twitter LinkedIn Instagram Pinterest \_\_\_\_\_ YouTube \_\_\_\_ Foursquare/Swarm \_\_\_\_ Other: \_\_\_\_ Do you own a boat? (If yes, please answer the following questions) Name of Boat: Power Sail Size Docked: Prospective Member Interest Survey (check all that apply) **Resort Amenities:** Dining \_\_\_\_ Spa Services \_\_\_\_ Skincare \_\_\_ Gym \_\_\_\_ Events \_\_\_\_ Beach \_\_\_\_ Bonfires & S'mores \_\_\_\_ Water Sports Activities \_\_\_ Live Music \_\_\_\_ Fitness Interests: Yoga \_\_\_\_ Pilates \_\_\_\_ Water Aerobics \_\_\_\_ Scuba Diving \_\_\_\_ Lap Swimming \_\_\_\_ Recreational Swimming \_\_\_\_ Swimming Lessons \_\_\_\_ Youth Camps \_\_\_\_ Personal Training Volleyball Weight Loss Golf Tennis Boating **Special Events:** Holiday Parties Dance Lessons Hawaiian Luau Ski/Snowboarding Trips Casino Night Bingo Health & Fitness Workshops Singles Activities Family Activities Happy Hours Beach BBQ Wine Tasting \_\_\_\_ Craft Beers \_\_\_\_ Resort Vacations \_\_\_\_ Speakers/Business Mixers \_\_\_\_ **Arts & Entertainment:** Theatre/Musicals \_\_\_\_ Fashion Shows \_\_\_\_ Sporting Events Please add any special interests you'd like us to consider adding: