

Omena Traverse Yacht Club

Application For Single/Family Guest Membership

****Due no later than April 1st****

*Applicant (1) _____ *Co-Applicant (2) _____

*Prefer to be called _____ *Prefer to be called _____

Occupation _____ Occupation _____

*Summer: PO Box Address _____

Street Address _____

Summer Phone _____ *Preferred cell phone _____

*Winter: Mailing address _____

Winter Phone _____

*Only 1 email address in the Membership Directory: Select “1” or “2” to be included in the Directory

Email address (“1”)

Receive Scuttlebutt e-mail: Y or N

Email address (“2”)

Receive Scuttlebutt e-mail: Y or N

*Names of Children under 26 Date of Birth

*Names of Children under 26 Date of Birth

Applicant Sponsors We, the Applicants, hereby confirm the two below named Adult Members have agreed to serve as our Recommending Sponsors. In doing so, they each agree to complete the required Sponsor Letter of Recommendation. The Sponsor Letters may be sent with this completed Application, or separately, and are to be received by the Membership Chair no later than April 1. Sponsors cannot be related to applicants or related to each other.

Applicant's name _____

Names of Recommending Sponsors (2 required):

1. _____

2. _____

The OTYC is run by volunteers and is only as strong as those who support the organization. Please indicate those activities in which you are willing to volunteer your time, energy, and enthusiasm as either a committee chair or helper:

___ Memorial Weekend ___ Youth Program ___ Catered Dinners Cocktail Party

___ June Gardening Day ___ Tennis ___ Special Programs and Events
(Site Cleanup and Planting)

___ June Opening Dinner ___ Breeze Newsletter ___ Ladies' Luncheon

___ 4th of July Picnic ___ Waterfront ___ Clubhouse Maintenance
or cocktail party

___ Labor Day Cocktail Party ___ Potluck Dinners ___ Logo Item Sales

1. It is anticipated that Guest Members will be active participants in all facets of Club life. Please note any specific skills or interests that you believe would be beneficial to the OTYC.

2. Do you have any historic or familial connection in and around the Omena area? If so, please explain.

Applicant's name _____

3. How much time do you anticipate being in the Omena area each year, from June to early September, when most of the activities at the OTYC take place?

4. As the Club will benefit from your active involvement, what benefits do you hope to derive from Membership?

5. Please share any other information about you and your family that would be helpful in our getting to know you

During the Guest Member season, it is expected that the Applicant will attend numerous functions and events, participate in activities and Club duties, and meet at least three Board members. **Full Adult Membership will not be considered unless the Applicant has met three or more members of the Board during their Guest Membership season**

Applicant's name _____

By our signatures below, we agree that we shall respect the privileges of OTYC Guest Membership. We also acknowledge that we have read all the Application Package documents and agree that we shall observe and abide by the OTYC Bylaws, regulations, and policies included therein.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

The completed Application, two Sponsor Letters of Recommendation are to be received by the Membership Chair at the address below **no later than April 1**. Applicants will be notified within one week of submission that their application has been received. Should the Applicant not receive notice within one week, it is incumbent upon the Applicant to re-contact the Membership Chair for confirmation of receipt.

Upon acceptance as an OTYC Guest Member, you will be billed for dues (\$390 Family/\$195 Single). **Send payment to: OTYC Treasurer, P.O. Box 103, Omena, MI 49674.** Note: Your Guest Membership is not effective until this payment is received and you have been notified thereof.

Bill Renz, Membership Chair
126 South 2nd St
#2303
Loveland, OH 45140
wrdds63@gmail.com
Questions? Call or text Bill at 513-607-7369

We thank you for your interest in Omena-Traverse Yacht Club!

For Club Use

Date Received: _____ Reviewed by: _____, Membership

Approved by the Board: _____