

ONEIDA LAKE SAILING CLUB



REGISTRATION FORM			
Membership Type		Date ngle 5.00	e:
Applicants Name :			
PERSON	AL INFORMATIO) N	
First/Last Name :			
Spouses Name :			
Child Name(s) :			
Full Address :			
E-Mail Address 1 :			
E-Mail Address 2:			
E-Mail Address 3:			
Phone Number 1	:		
Phone Number 2	:		
BOAT IN	IFORMATION		
Boat Name			
Make/Model :			
Marina	:		
INTERE	STS		
Circle Applicable Interests		Crew with Others Women's Learn to Sail	

Mail Payment to: Oneida Lake Sailing Club, c/o Kristin Tooker, 220 Park Avenue, Oneida, NY 13421