LONG BEACH YACHT CLUB

P.O. Box 97

Long Beach, Mississippi 39560 Member Gulf Yachting Association

MEMBERSHIP RESPONSIBILITY STATEMENT

Applicant Name:	Spouse's Name	
Applicant Residence:	Zip	Phone
Applicant Mailing Address:	Zip	Phone
I have filled out and submitted an application for membership in the	e Long Beach Y	acht Club.
I have read, understood, and will follow all the LBYC CLUB RULI	ES.	
I have read, understood, and will follow all the LBYC swimming po [Swimming pool rules are found in (but not limited to) Sections		LUB RULES
My children have read (or had rules read to them), understand, and such as POOL RULES.	will follow all t	he LBYC rules that pertain to children,
I have read, understood, and will follow all the LBYC BYLAWS.		
I also understand that all members of Long Beach Yacht Club will I will pay assessments in addition to club dues during the year.	pe required to pa	ay assessments during the year and that
Signature of applicant:		Date: :/ (mm/dd/yyyy)
Spouse's Signature:		Date:/(mm/dd/yyyy)
DO NOT WRITE BELOW	THIS LINE	
Approved:/(mm/dd/yyyy)		