

**WEBSTER SAILING ASSOCIATION MEMBERSHIP RENEWAL FORM**

**\*\*\* DUES DUE BY MARCH 1, PENALTY FOR LATE RENEWAL, READ BELOW \*\*\***

**\*\* PROOF OF INSURANCE REQUIRED, READ BELOW! \*\***

MEMBERS NAME:		SPOUSE/SIGNIFICANT OTHER:	
ADDRESS:			HOME PHONE:
CITY:	STATE:	ZIP:	BUS/CELL PHONE
EMAIL:	1.	2.	

**REGISTERED BOATS** (Please list each boat separately on the 3 rows provided below.)

Length	Type Hull: M=mono C=cat D=dinghy	Make	Model	Boat Name and Hull ID#	COLOR?	SAIL #	STATE REGISTRATION NUMBER? (if boat is currently registered)	LOCATION TYPE DESIRED FOR RENEWAL YEAR M=MOORING D=DRY SAILING PARKING?	LAST YEARS ASSIGNED PARKING SPACE/MOORING #	REASON FOR REQUEST OF CHANGE IN PARKING SPACE/MOORING #?

PAYMENT CALCULATION	FEE SCHEDULE	ENTER AMOUNT
BASIC MEMBERSHIP FEE (TO BE PAID BY ALL MEMBERS)	\$70.00	\$70.00
FACILITY FEE (TO BE PAID BY ALL MEMBERS WHO USE THE FACILITIES INCLUDING BOAT RAMP)	\$155.00	\$155.00
WSA BOAT REGISTRATION FEE (INCLUDES ONE BOAT, TO BE PAID BY ALL MEMBERS WHO STORE THEIR BOATS AT WSA, EITHER MOORING OR DRY SAILING)	\$40.00	\$40.00
ADDITIONAL BOAT STORAGE FEE	AFTER FIRST BOAT, INCLUDED ABOVE, \$15.00 PER BOAT INCLUDING DINGHYS	# OF BOATS x \$15.00
OPTIONAL LOTTERY FEE FOR BOAT SLIP SPACE \$25.00 PER CHANCE		# OF CHANCES x \$25.00
OPTIONAL REPLACEMENT CLUBHOUSE KEY FEE		\$2.00
LATE FEE (If payments are not postmarked by March 1 <sup>st</sup> )		\$50.00
DONATIONS		
<b>TOTAL AMOUNT DUE</b>		

THE FRONT GATE HAS A NUMERIC COMBINATION LOCK: YOU WILL RECEIVE THE 4 DIGIT NUMBER AFTER YOU PAY YOUR DUES. THIS COMBINATION WILL BE CHANGED EACH YEAR AT THE SPRING WORK PARTY AND THE NEW NUMBER WILL BE ON THE BACK OF YOUR MEMBERSHIP CARD.

**IMPORTANT:** PROOF OF PERSONAL LIABILITY INSURANCE IS REQUIRED FOR MEMBERSHIP. MOST HOMEOWNER INSURANCE POLICIES AUTOMATICALLY COVER YOUR BOAT FOR PERSONAL LIABILITY COVERAGE. THIS IS NOT COVERAGE FOR THE PROPERTY DAMAGE TO YOUR BOAT. YOU MAY SEND YOUR POLICY'S DECLARATION PAGE WITH THE FOLLOWING INFORMATION (HIGHLIGHTED PLEASE): INSURED'S NAME & ADDRESS; INSURANCE CO'S NAME & ADDRESS; POLICY NUMBER; EFFECTIVE; DATE & POLICY PERIOD; PROPERTY & LIABILITY COVERED; AMOUNT OF COVERAGE (\$300,000 MINIMUM). IF YOU DON'T HAVE A COPY OF YOUR POLICY'S DECLARATION PAGE YOU MAY HAVE YOUR INSURANCE COMPANY SEND A CERTIFICATE OF INSURANCE DIRECTLY TO OUR SECRETARY.

**\*\*\*Memberships renewed AFTER March 1<sup>st</sup> OR WITHOUT PROOF OF INSURANCE BY MARCH 1<sup>st</sup> MUST INCLUDE A \$50 LATE FEE.\*\*\*** Failure to pay dues/late fees by March 31<sup>st</sup> will result in loss of membership, requiring a new application for membership, and NO guarantee is given for your previous boat space, which may be given to someone else.

**THE RULES FOR MISSING THE DEADLINE FOR RENEWALS WILL BE STRICTLY ENFORCED.**

MAKE CHECKS PAYABLE TO: **WEBSTER SAILING ASSOCIATION**

RETURN THIS FORM, WITH PAYMENT AND **PROOF OF INSURANCE**, TO:

LEE AMODEO, 755 LEBANON HILL, SOUTHBRIDGE, MA 01550 PHONE: (508) 864-6594

email: WSAsailsecy@gmail.com