



# COLUMBIA RIVER YACHT CLUB

37 NE TOMAHAWK ISLAND DR. PORTLAND, OR 97217

## APPLICATION FOR MEMBERSHIP

Thank you for your interest in joining the Columbia River Yacht Club! Below is a link to our website which can provide more information about membership, such as the Club's history, a list of our fantastic amenities, and information about our events and cruises. [www.cryc.com/join-the-club](http://www.cryc.com/join-the-club)

**If you would like to arrange a tour, please contact the office at (503) 289-6561.**

To start the application process, please submit the following items to the front office:

- Membership Application
- Background Check
- Credit Card or ACH information
- Digital photo of you (or of you and your spouse/family if applicable)
- Digital photo of your vessel (if applicable)
- Initiation fee, which is currently \$3,025. This can be paid via check made out to Columbia River Yacht Club, or with a credit card (cards incur an additional 3% fee)

Once your initiation fee has been received and your background check has been run, you will need to set up an appointment with the office to be given access to the grounds while your membership application is pending. At this time your information will be posted on the Club's bulletin board for the required thirty-day period. During this time, you will need to attend a minimum of 3 out of 5 events or activities listed below to help you get acquainted with the club and its members.

- Social Event or Cruise
- Saturday Lunch or Dinner
- Special Gentleman's or Ladies' Event
- Volunteer to participate on the Cooking Crew for an event
- Participate in a Paddlefish training or orientation session
- Meet with the Chairman of the Cruise Committee to learn about our many cruise opportunities
- Meet with the Chairman of the Entertainment Committee to learn about our many social events
- Member Orientation interview with Membership Chairman

To help track your progress, it is your sponsor's responsibility to introduce you to each Flag Officer and Board Member who will then sign your signature card. Once the signature card has been completed and returned to the Club office, your name will be presented to the Membership Committee for their review and recommendation to the Board of Directors. This decision takes place on the third Thursday of every month in which there is a scheduled Board Meeting.

### Sponsor Endorsement

Sponsor's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_ Signature: \_\_\_\_\_



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## **JOINING COSTS & MONTHLY CHARGES**

### **JOINING COSTS**

Initiation Fee	\$ 3,000
<u>Brass Keys</u>	<u>\$ 25.00</u>
<b>Total Cost to Join</b>	<b>\$ 3,025.00</b>

### **MONTHLY MEMBERSHIP CHARGES**

Monthly Dues	\$ 230.00
Monthly Meal Ticket	\$ 46.00
Two Thursday Night dinners @ \$21.00	
Monthly Building Fund	\$ 21.00
<u>Fuel System Replacement Fund (FSRF)</u>	<u>\$ 10.00</u>
<b>Total Monthly Charges</b>	<b>\$ 307.00</b>

### **Monthly Moorage Fees**

Moorage fees are based on the amount of water owned at .13 per square foot. (Example: 1200 sq. ft of water rights owned  $.13 \times 1200 = \$156.00$  per month). There is an \$11.00 monthly fire system monitoring fee and if the boathouse is hooked to sewer, there is a monthly charge of \$25.00.

Please note – at the time of water purchase a transfer fee is charged. The transfer fee is \$1.25 per square foot. (Example: 1200 sq. ft. X \$1.25 = \$1500 for the transfer fee to CRYC). This can be paid by either buyer or seller, as agreed upon by them.



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## APPLICANT INFORMATION

### MEMBER

First Name: \_\_\_\_\_ M.I. \_\_\_\_ Last: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### EMPLOYMENT

Company Name: \_\_\_\_\_ Industry: \_\_\_\_\_

Position: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### FIRST MATE

First Name: \_\_\_\_\_ M.I. \_\_\_\_ Last: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### CHILDREN

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### HOME ADDRESS

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

### BILLING ADDRESS (IF DIFFERENT)

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

### VEHICLE INFORMATION

Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_



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## VESSEL INFORMATION

### MAIN VESSEL

Vessel Name: \_\_\_\_\_

Make and Model: \_\_\_\_\_

Year: \_\_\_\_\_ Boat Length & Width: \_\_\_\_\_

Registration Number: \_\_\_\_\_ State of Registration: \_\_\_\_\_

Current Moorage Location: \_\_\_\_\_

### ADDITIONAL VESSEL

Vessel Name: \_\_\_\_\_

Make and Model: \_\_\_\_\_

Year: \_\_\_\_\_ Boat Length & Width: \_\_\_\_\_

Registration Number: \_\_\_\_\_ State of Registration: \_\_\_\_\_

Current Moorage Location: \_\_\_\_\_

## Insurance & Moorage Information

Below are the summarized insurance requirements that Columbia River Yacht Club has of any vessels that come on property. **Please attach a copy of your current vessel insurance when submitting your application.**

### HOUSE AND MOORAGE RULES: Section B (6) - Insurance Requirements

- |                             |   |
|-----------------------------|---|
| (a) Additional Insured:     | <i>Columbia River Yacht Club<br/>37 N.E. Tomahawk Island Dr. Portland, OR 97217</i> |
| (b) General Liability:      | <i>\$1,000,000.00</i>   |
| (c) Environmental Clean-up: | <i>\$997,100.00 (required for boat policy only)</i>                                 |
| (d) Notice of Cancellation: | <i>At least 10 day written notice prior to cancellation</i>                         |

### HOUSE AND MOORAGE RULES: Section C (1) - Water Purchase

Summarized: Pending members cannot purchase water until after the 30 day waiting period is complete, and their application has been approved by the Board of Directors.

### HOUSE AND MOORAGE RULES: Section C (1) - Live Aboard Regulations

Summarized: Members are not permitted to live on property. Upon request, a member must provide proof of outside permanent residence.



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## INTERESTS

**What is important to you regarding membership at CRYC?**

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**Have you been a member at any other social or boating clubs? If so, please list them:**

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**What hobbies or interests do you have?**

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**Please check which of the following you would be interested in volunteering for:**

- Cooking Crew
- Entertainment & Cruise Committees
- Ladies Activity Committee
- Photography
- Club Publications & Social Media
- IT
- House & Grounds
- Paddlefish Maintenance & Crew
- Other: \_\_\_\_\_



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## **BACKGROUND AND CREDIT CHECK**

Please be aware that if your credit has been frozen, we will be unable to run a credit check. If you know this to be the case, please contact the office at (503) 289-6561.

**This form is for Club Office use only. It will be shredded after internal review.**

### **MEMBER**

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Exp: \_\_\_\_\_

### **SPOUSE**

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Exp: \_\_\_\_\_

### **HOME ADDRESS**

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**I, the undersigned, do hereby authorize the Columbia River Yacht Club to perform a background and credit check. The credit report information will only be used for membership screening and all information will be kept confidential.**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Office Use**

Background and credit check run on date: \_\_\_\_\_ Initials: \_\_\_\_\_

Notes: \_\_\_\_\_



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## BILL PAYMENT PREFERENCE

Membership dues and Boathouse moorage dues are paid forward. Charges for goods purchased, such as food, apparel, and temporary storage are charged retroactively. Statements are sent the first week of every new month, and bills must be paid by the 15<sup>th</sup> in order to avoid a 3% late fee. There are three ways to pay your membership dues: by check, setting up ACH, or charging to a credit card (credit cards incur a 3% fee).

Please fill out the form below to inform us of how you would prefer to receive your statement and pay your bill each month.

**PRINT MEMBER NAME:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

### How would you like to receive your monthly statement?

- BY MAIL:** Please list your billing address

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

- By EMAIL:** Please provide your email address

Email: \_\_\_\_\_

Emailed statements will be sent from [quickbooks@notification.intuit.com](mailto:quickbooks@notification.intuit.com). Please add this email to your safe sender list so it is not rejected by your email provider.

### How would you like to pay your bill?

Please keep in mind that this can be changed at any time by emailing [accounting@cryc.com](mailto:accounting@cryc.com)

#### CHECK

#### ACH: Automatically charged each month

Please list the last 4 digits of the account number: \_\_\_\_\_

#### CREDIT CARD: Automatically charged each month (3% convenience fee)

Please list the last 4 digits of the account number: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



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## VISA MASTERCARD CHARGE AUTHORIZATION

The holder of the credit card listed herein authorizes the Columbia River Yacht Club (a private membership club) to draft against such credit card, all amounts due to the Columbia River Yacht Club. **With the exception of fuel, all other credit card charges incur a 3% fee.**

PRINT MEMBER NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### Credit Card Information

CARD TYPE: VISA MASTERCARD

CARD NUMBER:

EXPIRATION DATE:        /        CVV CODE:

PRINT NAME ON CARD: \_\_\_\_\_

COMPLETE BILLING ADDRESS FOR CARD:

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_





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## ACH DEBIT TRANSACTION AUTHORIZATION

I (we) hereby authorize COLUMBIA RIVER YACHT CLUB to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to debit the same to such account for monthly dues and account charges incurred. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

This authority is to remain in full force and effect until COLUMBIA RIVER YACHT CLUB has received written notification from me (or either of us) of its termination in such time and manner as to afford Columbia River Yacht Club and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

**PRINT MEMBER NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

### Bank Account Information

**FINANCIAL INSTITUTION NAME:**

**TYPE OF ACCOUNT:**

- Checking
- Savings

**Routing Number:**

**Account Number:**

TLC Member 123 Anywhere St. Adrian, MI 49221	1025
DATE _____	
PAY TO THE ORDER OF _____	\$ _____
	_____ DOLLARS  Security Feature Check or Scan
<b>TLC Community Credit Union</b>	
MEMO _____	
:0000000000: :0000000000: 1025	
Routing Number	Account Number
	Check #



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## FUEL PURCHASES

In order to make a fuel purchase you must have a credit card on file, although you may choose to pay with a check within 3 days of making a fuel purchase. After the 3 days have expired, your card will be automatically charged. If paying by check, a 3% discount will be applied to your fuel purchase.

I certify that I have received and read the operating instructions, fuel spill and fire safety training materials provided to me by Columbia River Yacht Club. I have also distributed the material to everyone that, under my supervision, will fuel my boat and I certify that we have been trained in the safe operation of fuel dispensing equipment at the CRYC fuel dock.

**MEMBER NAME:** \_\_\_\_\_

**MEMBER NUMBER(OFFICE):** \_\_\_\_\_ **4 DIGIT PIN OF YOUR CHOICE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

## Credit Card Information

**CARD NUMBER:** \_\_\_\_\_

**EXPIRATION DATE:**        /        **CVV CODE:** \_\_\_\_\_

**PRINT NAME ON CARD:** \_\_\_\_\_

**COMPLETE BILLING ADDRESS FOR CARD:**

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

The holder of the credit card listed herein authorizes the Columbia River Yacht Club (CRYC) to draft against such credit card, all amounts due to the CRYC for fuel purchases made by holder through CRYC's automated fuel dispensing system.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

## Office

Sent Instructional Email

Sent email to Maintenance

**PHONE:** (503) 289-6561

**EMAIL:** CRYC@CRYC.COM

**WEBSITE:** CRYC.COM



# COLUMBIA RIVER YACHT CLUB

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## EMERGENCY CONTACT INFORMATION

Member Name: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_

## LIABILITY RELEASE

In return for myself, my child, and/or my guest being permitted to take part in the activities of the Columbia River Yacht Club, I do hereby agree to the following:

**WAIVER OF LIABILITY:** I waive and release any right I, my heirs, distributees, guardians, legal representatives and assigns may have or acquire to make a claim against; sue; attach the property of; or prosecute Columbia River Yacht Club, or any of its members, governors, officers, agents, instructors, and affiliated organizations (herein referred to as "the releasees") for monetary damages caused by any injury to myself, my child, or my guests, or damage to the property of myself, my child, or my guest, arising from my own, my child's, or my guest's participation in the activities and use of the property of Columbia River Yacht Club, whether or not the injury or damage results from their negligence or other action.

**ASSUMPTION OF RISK:** I am aware that the activities may involve maneuvering a boat, sailboard or other watercraft on deep waters in potentially hazardous conditions which may include, among other things, strong winds and high waves, sudden and unexpected immersion in deep waters and collision with other watercraft or stationary objects such as docks, pilings and buoys. With knowledge of the dangers involved, I voluntarily ask that myself, my child, my guests be allowed to take part in the activities.

**INDEMNITY AGREEMENT:** I agree to indemnify and hold the releasees harmless from any loss, liability, damage, or cost, including reasonable attorney fees, that may incur due to my, my child's, or my guest's participation in the activities and use of property of Columbia River Yacht Club, whether or not such loss, liability, damage or cost results from negligence or other action. This agreement shall remain in effect until Central Florida Yacht Club receives written notice of the cancellation of the consent.

I ACCEPT ANY AND ALL RISKS OF INJURY, OR DEATH, TO MYSELF, MY CHILD OR MY GUESTS, AND ANY PROPERTY DAMAGE ARISING FROM PARTICIPATION IN THE ACTIVITIES AND THE USE OF THE PROPERTY OF COLUMBIA RIVER YACHT CLUB, WHETHER OR NOT CAUSED BY THEIR NEGLIGENCE OR OTHER ACTION.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THE AGREEMENT INCLUDES A WAIVER OF LIABILITY, AN ASSUMPTION OF RISK, AND AN AGREEMENT BY ME TO INDEMNIFY THE RELEASEES, AND I AGREE TO IT OF MY OWN FREE WILL.

Member Name: \_\_\_\_\_ Signature: \_\_\_\_\_