

MEMBERSHIP RENEWAL FORM - COMPLETE AND RETURN

(Note: Fillable form – type in information on computer)

If you are RENEWING your Membership by using US Mail and Paying by Check, please complete the brief information below for one family member (we have everything else on file), enclose this form and include a Check for \$30 payable to BCYC, send to BCYC, PO Box 171, Boyne City, MI 49712

First Name:	Last Name:
Email address:	Phone #:
boat information. If you including the name(s), m have a name, it will not a	C membership database up to date, we need to have your most current contact and ever made changes to your boat "inventory," please update your boat information by take(s) and model(s) under your personal information. (Note, if your boat does not appear in the Membership Directory). If any of your information has changed (please ted in the current Directory) and note it below:
What Information has Ch	anged (Check all that apply)?
☐ Name(s)	☐ Boat Information
Address info	(Manufacturer, Model, Boat name etc.)
☐ Email info	Other (Describe in space below)
☐ Phone Number	
Note changes in this space (lease printy.
Please check all that apply:	
Standard mem	ibership: \$30.
☐ I am a Past Co	ommodore or spouse of Past Commodore
	w membership card(s). Replacement cards are \$2.00 per card. Please add appropriate renewal check.
I am interested would like).	in hosting or co-hosting an event (we will team you up with an "experienced" host if you
	in placing an advertisement in the Directory. Please contact me at this phone number: