



# SINGLEHANDED SAILING SOCIETY

## 2008 MEMBERSHIP APPLICATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

YES, I have web access, not an issue!

Boat Name: \_\_\_\_\_ Sail Number: \_\_\_\_\_

Boat Model: \_\_\_\_\_ CF/Doc Number: \_\_\_\_\_

Waterline Length: \_\_\_\_\_ Displacement: \_\_\_\_\_

PHRF/MPHRF Rating: \_\_\_\_\_

Type of Rig: \_\_\_\_\_ Length on Deck: \_\_\_\_\_

Hull Color: \_\_\_\_\_ Deck Color: \_\_\_\_\_

Year Built: \_\_\_\_\_ Yacht Club (optional): \_\_\_\_\_

Where Berthed (marina and slip #): \_\_\_\_\_

**NOTE: To race, a current PHRF/MPHRF Certificate is required. Please enclose a copy and remember to tell us if it changes. Failure to race under your correct rating is grounds for Disqualification.**

### SSS TRANSPAC ASPIRATIONS:

Next Time!  Someday!

### LONGPAC ASPIRATIONS:

Next Time!  Someday!

### WOULD YOU LIKE TO BE AN SSS OFFICER?

Vice Commodore/Race Chair

Race Information Officer

Treasurer

YRA Delegate

### WOULD YOU LIKE TO VOLUNTEER FOR THE SOCIETY?

Transpac/Longpac Committee

Other Race Committee (please also send in the RC sheet!)

Website/Newsletter

General – Ideas for trophies, speakers, etc.

### MEMBERSHIP RATES

Dues cover all Bay and Coastal race entry fees for the calendar year January 1 through December 31, 2007; you must also complete an entry form prior to **each** race. Select your membership category and enclose a check payable to the **Singlehanded Sailing Society**.

\$135.00 – Membership

\$160.00 – Membership including YRA Fee if racing HDA, OYRA, ODCA etc. as an SSS Member

**NOTE:** To race YRA as an SSS member, you must race in at least one SSS sponsored event during the year.

\_\_\_\_\_ NUMBER ON CHECK ENCLOSED