

J **24** Fleet 61

2016 Fleet Membership Application

Yacht Name _____ Sail Number USA-_____

Owner _____

Address _____

Email _____

Telephone Work _____

Cell _____

Home _____

Helmsman (if different) _____

Fleet Dues: \$75.00

Make Check payable to: Ellen Murphy

Mail to: Ellen Murphy
185 Beach St.
City Island, NY 10464