

Mutineer 15 Class Association Membership Application

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____)____-____ Mobile Phone (____)____-____

Email _____

HIN# _____ Model # _____

Boat Name _____ Sail # _____

Number of years you have owned your boat? _____

I am a (check one):

Skipper/Owner Crew/Owner Crew Interested observer

Local Club Affiliation:

Club Name _____

Club Location _____

Number of Mutineers in your club _____

Mutineer15 Fleet Affiliation (if any): Fleet No. ____ Location _____

Type of Membership (Check one):

Full - Boat owner with voting rights
Annual Dues = \$25 (You may pay for a maximum of three years)

Associate - Anyone with an interest in the Class (Non-voting)
Annual Dues - \$15 (You may pay for a maximum of two years)

This Membership is (check one): New Renewal

Years for which you are paying: _____

(Note: The membership year is from November 1 to October 31. New members joining after the current years' National Championship shall be valid to the end of the following membership year.)

Total Amount Enclosed: \$ _____

Make Checks Payable to: Mutineer 15 Class Association

Send application and payment to: Mutineer 15 Class Association
Attn: Rosemary McKnight
365 Hopi Place
Boulder, CO 80303