



ROCHESTER YACHT CLUB

Established in 1877

GUEST PRIVILEGES APPLICATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

YACHT CLUB* _____

BOAT NAME* _____

HOST'S NAME* _____

DATES OF VISIT: START _____ END _____

REQUESTED SPENDING LIMIT \$ _____ **(Not to exceed \$500.00)**

CREDIT CARD NUMBER: _____ **AMEX/MC/VISA**

THREE DIGIT CODE: _____

EXPIRATION DATE: _____

By signing this guest privileges application at the Rochester Yacht Club, I authorize the Rochester Yacht Club to charge the above-indicated credit card for all charges incurred by me during my current visit to the Rochester Yacht Club.

SIGNATURE: _____ **DATE:** _____

RYC Guest Privileges Number # _____

Account Opened By: _____ Date: _____

* Visiting boaters, please enter name of Home Club and Boat Name.