

# Wessagussett Yacht Club 2010 Mooring Application

If you plan to have a boat at WYC for 2010, you must complete this form for each boat you plan to moor, including storm moorings. New members must fill out all sections - returning members only need to fill out the sections indicated with an asterisk (\*), unless you have a new boat or wish to update your contact or service provider information. Forms must be submitted by **APRIL 30** to ensure your position in the field will not be lost. Boats whose applications are received after that date will be placed at the ends of the fleet. Early submission of forms is **GREATLY** appreciated (thanks in advance)!

\*=Required Fields

|                           |   |
|---------------------------|---|
| <b>MEMBER INFORMATION</b> |   |
| Name*:                    | _____ New Member or year joined: _____    |
| Home Phone:               | _____ Work Phone: _____                   |
| Cell Phone:               | _____ Email: _____                        |
| Emergency Contact:        | _____ Cell: _____                         |
| Day Phone:                | _____ Evening Phone (if different): _____ |

|                         |  |
|-------------------------|--|
| <b>BOAT INFORMATION</b> |  |
| Boat Name*:             | _____ Boat (Make/ Model): _____ Power/Sail _____       |
| LOA:                    | _____ Beam: _____ Draft: _____ Inboard/Outboard: _____ |

|  |  |
|--|--|
| <b>SERVICE PROVIDER INFORMATION</b>                              |  |
| Name of Service Provider (circle one): PC/OS    TR    Self    or |  |
| Other (please provide contact info for other contractor): _____  |  |

**STATUS INFORMATION FOR RETURNING MEMBERS\***

Do you currently have a mooring for this boat in the water at WYC? \_\_\_\_\_

Storm Mooring? \_\_\_\_\_

If so, please provide its location (LAT/LON if you have it, position relative to other boats if you don't). \_\_\_\_\_

If not, last location (LAT/LON if you have it, position relative to other boats if you don't). \_\_\_\_\_

Depth of high water at your mooring location: \_\_\_\_\_

**Do you intend to return to your previous location?** \_\_\_\_\_

**Would you like to move closer to the floats if your seniority permits?** \_\_\_\_\_

**Would you like to move to another specific location (where? i.e. East End, West End, further out)?** \_\_\_\_\_ (All mooring site relocations require

modification of the mooring for the depth of water at the new location)

|                                    |
|------------------------------------|
| <b>Signature of Member*:</b> _____ |
|------------------------------------|

Return Completed forms To:  
Michael Gurish, WYC Mooring Chair  
12 Babcock PI  
Dedham, MA 02026  
Email: mfgurish@comcast.net  
FAX: 617-525-1310  
Phone (day): 617-525-1235  
(evening): 781-329-4316