

BLUE MOUNTAIN LAKE CLUB, INC. MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name:

Current address:

City:	State:	ZIP Code:
How long have you lived at this address?		Date of birth:
Home Phone:	Cell Phone:	Email:

EMPLOYMENT INFORMATION

Current employer:

Employer address:

City:	State:	ZIP Code:
Position/Occupation:		

EMERGENCY CONTACT

Name of contact:

Address:	Phone:	
City:	State:	ZIP Code:
Relationship:		

IF YOU WERE REFERRED BY A CURRENT BLUE MOUNTAIN LAKE CLUB, INC. MEMBER(S), PLEASE INDICATE WHO?

Name:

Name:

Name:

PERSONAL REFERENCES (WHO HAVE KNOWN YOU FOR AT LEAST 5 YEARS)

Name:	Phone or Email:
Name:	Phone or Email:
Name:	Phone or Email:

PLEASE LIST ANY OTHER OUTDOOR CLUBS OR ORGANIZATIONS YOU BELONG TO

Name:	Location:
Name:	Location:

SIGNATURES

I hereby apply for membership to the Blue Mountain Lake Club, Inc., and agree that should I be accepted into membership that I shall in no way violate any of the rules, laws, or bylaws for any reason. I agree to comply with the direction of the governing body of the Club. I certify that the answers I have given on this application are true and understand any false statements will lead to immediate forfeiture of membership and any fees paid and that I have read and accepted the Blue Mountain Lake Club, Inc. bylaws.

Signature of applicant:	Date:
Should you have any questions on the application process, please email or call Lou Thayer, President at thayer187@yahoo.com or 518-928-0032	Please mail signed application to: Blue Mountain Lake Club, Inc. Lou Thayer, President PO Box 1271 South Glens Falls, NY 12803

CLUB USE ONLY

Date Application Received:	Date Application Approved/Disapproved:
Name of Club Officer or Board Member reviewing this application:	
Signature of reviewer:	Date: