



Canadian Radio Yachting Association

MEMBERSHIP APPLICATION

Date _____ Renewal ____ New ____

Name: _____ 2nd Member _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone :(_____) _ _____ E-Mail: _____

CRYA #: _____ CRYA # for 2nd Member, same address _____

Club Name: _____ City _____

Annual Dues (\$15) \$ _____

2nd MEMBER – SAME ADDRESS (\$7.50) \$ _____

CRYA PINS \$5 each, 5 for \$20 \$ _____

REGISTRATION FEE \$5 for each new or transferred yacht \$ _____

TOTAL \$ _____

Make cheque or money order **payable to CRYA** (US Funds Acceptable)

List New or Transferred Boats

Class	Designer	Hull #	Existing	Previous Owner
			Sail #	CRYA #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Signature _____

Date _____

Please print. Complete out and send this form with your cheque or money order, **payable to CRYA** to:

Larry Miskie, 848 25th A Street East, Owen Sound, ON N4K 6W6