

Application for Full Membership

Date:	
Applicant Name:	Co-Applicant Name:
	Birthday/Age:
Home Address:	
Home Phone:	Cell Phone:
	Co-Applicant Email:
Business Address (If Applicable):	
Business Phone:	Business Email:
Children's Name(s) & DOB:	
Sponsors:	
acquainted with the applicant but who are not members of Shareholder Members of the Club for at least two (2) years	ommendation from Full or Shareholder Members who are well f the applicant's Immediate family and have themselves been Full or . The Membership Committee, at the Board's discretion, may make icants in cases where the applicant is already personally known by
Primary Sponsor:	
2 nd Sponsor:	
3 rd Sponsor:	
I/we understand that access to Small Point	Beach, Club parking and other facilities is limited
to Club Members and their Guests who are	in residence at the Club at that time.
Applicant Signature:	

Co-Applicant Signature: _____

Please email (or mail) completed Application and Letters to SPC Membership Chair Roger Farrington at: <u>roger@rogerfarrington.com</u>, 46 Club Road, Phippsburg, ME 04562. If you have any questions, please email or call Roger Farrington at 617-529-2464. Complete Membership Information is available in the SPC Website: https://smallpointclub.com/become-a-member/