



2025-2026 Off-Season Membership Application

Please return this completed application to the LGYC office at:
1250 South Lake Shore Drive, Fontana, WI 53125

Please include a check for the Initiation Fee- \$300 + 5.5% sales tax = \$316.50

Membership Description and Requirements

- Membership covers the time period of **10/1/2025 – 4/30/2026**.
- Dining and beverage services are available on Wednesday, Friday and Saturday evenings with the exception of private events when we may be closed.
- Food and beverage minimum is \$500.00 (calculated before tax and gratuity) for the membership period (any unused portion of the minimum will be billed at the end of the membership period).
- After 4/30/2026, membership is automatically cancelled. There is no future membership in any category guaranteed.
- Off-Season Dining Members are required to set up autopay via Credit Card (3% fee) or ACH.
- Off-Season Dining Members are expected to follow the rules and regulations of the Lake Geneva Yacht Club. Failure to follow rules and regulations may result in the loss of membership.
- Off-Season Dining Members are non-voting members, therefore **not** eligible for preferred parking and **not** guaranteed reservations including special events.
- Membership covers dining and beverage privileges only.
- **Dining reservations are required.** Parties over 8 require Dining Manager approval.
- Off-Season Dining Members are not eligible to host private events.

SIGNATURE OF APPLICANT

Applicant Name	Signature	Date
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Applications shall be in writing and submitted to the LGYC Office for consideration and recommendation to the Board for approval, which is subject to any maximum membership limit or other requirements that have been established by the Board. Off-Season Diners must have their Recommending Members sign their application each year to re-apply as applications do not roll over from year to year. **Recommending Members must be Honorary, Senior, Regular or Intermediate Members of the club. Recommending Members may recommend a MAXIMUM of 2 Off-Season Dining Members annually.**

Recommending Member (1) Name	Member Signature	Date
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Kristin Gannon (Commodore)	<i>Kristin Gannon</i>	Date
Recommending Member (2) Name	Member Signature	Date



2025-2026 Off-Season Applicant Information

Name of Applicant:		Applicant's Birth date:	
Mailing Address:		Home Phone:	
Email Address:		Cell Phone:	
Name of Spouse:		Spouse's Email Address:	
Spouse's Cell Phone:			

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