Welcome to Savannah Yacht Club!



Please complete the below form and return to our Clubhouse before arrival in order to have a SYC Guest Card issued during your Regatta stay.

Last Name:	
First Name:	
Affiliated Yacht Clo	ub:
*If not a	Yacht Club member, please write "Regatta Network".
Street Address:	
City, State:	Zip:
Phone #:	
Email Address:	
office. We will man Visa credit card. If dining, drinks, pro hours of the end o	n site, please see our Front Office Administrator in the Clubhouse ke a copy of your current driver's license, as well as a Mastercard or you are not affiliated with a Yacht Club, any charges you incur from shop, docks, etc., will be charged to the credit card on file within 48 f your stay at SYC. If you are affiliated with a Yacht Club, please mation and will bill your current account with that Yacht Club.
*SYC Office Use On	alu
Date Issued:	''y
Card Issued By:	
Total # in Party:	Guest Card # Issued: