

APPLICATION FOR MEMBERSHIP RENEWAL (2019-20)

Please print and use one form per individual or family

I,.....hereby apply for membership renewal of the Jervis Bay Sailing Club Inc., for the category shown below:

SENIOR JUNIOR ASSOCIATE FAMILY

I understand that upon my admission I/we will be bound by the constitution and by-laws of the Jervis bay Sailing Club Inc.

SignedDate .../.../... (For and on behalf of my family, if applicable)

Postal address
Post Code

Email address	 	 	 	 	
Home Phone	 	 	 	 	
Work Phone	 	 	 	 	
Mobile Phone	 	 	 	 	

SENIOR MEMBERSHIP	(\$130.00)			
Surname	First Name		DOB	
				\$130.00
JUNIOR MEMBERSHIP	Under 18 @ 30th Aug. 2019	(\$40.00)		
Surname	First Name	DOB		
				\$40.00
ASSOCIATE MEMBERSHIP	(\$55.00)			
Surname	First Name		DOB]
				\$55.00

FAMILY MEMBERSHIP

(\$225.00)

Family members' names and children's dates of Birth

,	Surname	First Name	DOB	
Adult 1				
Adult 2				
Youth 1				
Youth 2				
Youth 3				
Youth 4				

\$225.00

Please complete the reverse side of this form.

VESSEL DETAILS

Name	Draft	Rego No.
Class	Location	Radios
Length	Hull Colour	Call Sign
Beam	Sail No.	Trailer Rego

CONSENT FOR THE PUBLICATION OF PERSONAL PARTICULARS

As a member of the Jervis Bay Sailing Club and by signing this document I consent to my (delete as necessary)

Name Boat Details Photograph Telephone Number

Email address Other.....

Being published in (Delete as necessary)

Club Newsletter	Media releases	Membership List	Other
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Until such time as this authority is withdraw in writing. I understand that my consent to publish does not mean that publication will necessarily occur. I understand that future withdrawal of this consent will result in cessation of publication only, **NOT RECALL** of previously publications.

Signed.....Date .../.../...

Direct Deposit invited.

Account Name – Jervis Bay Sailing Club Account # - 72210 BSB – 802124 Please use your <u>Surname as the Reference</u> to ensure your payment can be tracked.

Note: This signed membership form must still be submitted to the club for your membership to be accepted. Payment alone will not make you a financial member and your YA insurance will not be approved until this form is received and reconciled with your payment.

OFFICE USE ONLY

Receipt #	Entered	Posted	
Membership approved a			
//		-	-
Secretary	Mer	nbership Director	