

QUEENSCLIFF LONSDALE YACHT CLUB Inc. A8634 ABN 56 805 955 914

MEMBERSHIP APPLICATION

Join QLYC with a member package for all ages and skill levels to suit you and your family.

| Join QLYC with a member | [,] package for all ages | s and | skill levels | to suit you | <u>ana your</u> | family. | | |
|--|---|------------------------|--|----------------|-----------------|----------------------------|--|--|
| ADULT SAILING | ADULT * | | FAMILY SAILING | | | | | |
| 18 + YEARS OLD | 18 + YEARS OLD | | | 18 + YEARS OLD | | | | |
| | | | | CHILDREN U | | | | |
| Participate in competitive sailing with an Australian Sailing registration number. Participate in social land and on water activities. Clubhouse / Deck Hire Key access Apply for craft storage Voting rights | Participate in social land and on water activities. No Australian Sailing registration number. Clubhouse / Deck Hire Key access Apply for craft storage Voting rights | | 2 Family Adults or 1 Family Adult and 2 Children: Participate in competitive sailing with Australian Sailing registration. (Nominate on the forms applicants to receive the Australian Sailing Registration number.) Other Family Children under 18 years old. Complimentary membership participating in social land and on water activities. Clubhouse / Deck Hire Key access Apply for craft storage Voting rights 18 + years old. | | | | | |
| Annual Fee \$ 230 | Annual Fee \$ 175 | | Annual Fee \$ 310 | | | | | |
| JUNIOR/ STUDENT UNDER 18 - 21 YEARS | CORPORATE SUPPORTER | | | FAMIL | Υ * | | | |
| Participate in competitive sailing with an Australian Sailing registration number. Participate in social land and on water activities. 18-21 Student or concession card Apply for craft storage Key access 15 + years old Voting rights 18+ years old Annual Fee \$ 80 | | | 2 Family Adults and Family Children under 18 years: No Australian Sailing registration number. Family participates in social land and on water activities. Clubhouse / Deck Hire Key access Apply for craft storage Voting rights 18 + years old. Annual Fee \$ 255 | | | | | |
| Select Membership Adult | Adult* Family | | Family | Junior | Corpo | | | |
| I agree to upgrade to Membership with at QLYC racing events. An Australian Sai | gree to upgrade to Membership with an Australian Sailing number if I sail competitively more than 3 times in any or YC racing events. An Australian Sailing registration number provides personal insurance for sailors & is mandatory elskippers and crew when participating in AS/AYF listed sailing events, which includes all QLYC scheduled race eventhan sailing events. I Name: The of Birth: (Required by cralian Sailing for Insurance.) Mobile: All Communication.) | | | | | any one year datory for | | |
| Occupation: | | | | | | | | |
| Emergency Contact: Mobile: | | | | | | | | |
| Nominate for Australian Sailing Re or your current Australian Sailing I Current Member of: Club Name: | | dent or cession No. | | YES | NO | | | |
| Do you have a current Working with Children check: WWCC Number: | | | | Attach photoco | | NO les of card | | |
| In the event of the admission of applicant above as a member, I agree to be bound by, conditions of membership (Available on the Website) and comply with the Club constitution and any By- laws, regulation and policies made under it. Date: Signature of Applicant: | | | | | ulations | | | |
| | * * | | | | | | | |

Fill in detail and e-mail signed the 4 pages to qlyc.secretary@gmail.com or post to PO Box 35 Queenscliff 3225

Office Use: Total Fee Due \$_____

Join QLYC with the membership package to suit you and your family. FOR FAMILY MEMBERSHIP FILL PAGES ONE AND TWO

| Appl Date | licants l of Birt | mily Adult Full Name: :h: (Required by ling for Insurance. | | Mob | ilo | | | | |
|--|---|---|--|--|--|--|--|--|--|
| Ema | il: | nmunication.) | | | | | | | |
| Addı | ress: | | | | | | | | |
| Occu | ıpation | : | | | | | | | |
| Emergency Contact: Mobile: | | | | | | | | | |
| Nominate for Australian Sailing Registration Number: YES | | | | | | YES NO | | | |
| or yo | our cur | rent Australiai | n Sailing r | egistration No. | | | | | |
| Curr | ent Me | mber – Club N | ame: _ | | | | | | |
| Do you have a current Working with Children check: WWCC Number: | | | | | | YES NO Attach photocopy of both sides of card to the application: | | | |
| vvvv | CC Null | | | | | | | | |
| Note: | Comple | | r all the fa | | | ustralian Sailing number if any.) (AS) registration number. | | | |
| | Date of Birth | Nominate f Registration N or list current A | Number | | Full Name | | | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| 4. | | | | | | | | | |
| men | nbershi | | n the Web | | | bound by, conditions of tion and any By- laws, regulations | | | |
| Dat | e: | Signature of Applicant: | | | | | | | |
| I au cons capa me c In ac | thorize siderati- acity as of a rele ddition, | and consent to on of the appli parent or guar ease and indem | o the fam cant's me dian, the nnity in th | mbership of the Club terms set out in this r te terms set out in con | ted above underta being accepted. I e nembership declar ditions of member | king the Club Activities after xpressly agree to accept, in my ration, including the provision by ship (Available on the Website). and any By- laws, regulations and | | | |
| Dat | e: | | Signature Parent or Cuardian | | | | | | |

Fill in detail and e-mail signed the 4 pages to qlyc.secretary@gmail.com or post to PO Box 35 Queenscliff 3225

INFORMATION SHEET

| Applicants | Name | | | | Intereste | Boat | | | |
|---|--|----------------|-------------------|--------------|-----------|----------|---------------|-----------------|------------------|
| Information | | | | | | | Sailor Y/N | Canoeist Y/N | Licence Y / N |
| Adult Sailing | | | | | | | , | , | - |
| Adult | | | | | | | | | |
| Family Sailing | | | | | | | | | |
| Family Adult | | | | | | | | | |
| Family Children 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| 4. | | | | | | | | | |
| Junior Student | | | | | | | | | |
| Corporate | QLYC committe | e upon request | will consider con | nmercial arr | angements | s. | | | |
| Club Boat Registration (List Keel boats and Tenders if applicable) | | | | | | | | | |
| Name of Boat Registration / Sail no. Class | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Storage Boatshed and Outside Yard Adult, Social and Junior members may apply to store craft. Storage is subject to availability of space and approval by QLYC committee. | | | | | | | | | |
| Will you apply for boatshed / yard craft storage. (Separate Application) YES NO | | | | NO | | | | | |
| How did you | find out abo | ut Queens | cliff Lonsda | le Yacht | Club? | | | | |
| Faceboo | Facebook Discover Sailing Days | | | Advertising | | | | | |
| Other Yach | Other Yacht Club Competitive Sailing Other | | | | | | | | |
| * Member Introduction Introduced By: | | | | | | | | | |
| Queenscliff Lo following area | | | | | | | | ny of the | |
| Discover Sa | iling Days | | Social | | M | Ianagem | ent Con | nmittee | |
| Canoeing l | Program | M | laintenance | | Commit | ttee Boa | t (Race r | nanageme | ent) |
| Other (Please sp | pecify) | | | | | | | | |

Fill in detail and e-mail signed the 4 pages to qlyc.secretary@gmail.com or post to PO Box 35 Queenscliff 3225

| I Recommend, | |
|---|---|
| | me of Applicant) |
| | |
| | |
| | |
| I Recommend, | |
| | Applicant, with the listed dependent applicants on page 2.) |
| | |
| Proposer and Seconder must be an Adult or S at the time of nomination. | ocial financial member of at least 12 months standing |
| | |
| | |
| | |
| PROPOSER: | |
| DECLARATION BY PROPOSER | nd the applicant(a) for membership of the slub, and |
| will support this application before the gener | nd the applicant(s) for membership of the club. and |
| will support this application before the gener | ar committee if required. |
| | |
| | |
| | |
| Signature of Proposer | Date: |
| | |
| | |
| | |
| | |
| SECONDER: | |
| | |
| DECLARATION BY SECONDER | |
| being a Voting Member of the Club, recomme support this application before the general Co | nd the applicant(s) for membership of the club and will ommittee if required. |
| | |
| | |
| | |
| Signature of Seconder | Date: |

Fill in detail and e-mail signed the 4 pages to qlyc.secretary@gmail.com or post to PO Box 35 Queenscliff 3225