



BRIGHTON & SEACLIFF YACHT CLUB INC

246 Esplanade, Seacliff, SA 5049

APPLICATION FOR MEMBERSHIP

Given Name (s)	Surname		
Address	Suburb		
State	Post Code		
Telephone (Home)	Mobile Phone		
Email Address			
Occupation	Date of Birth		
Membership Category (please tick appropriate category)	<input type="checkbox"/> Senior Sailing	<input type="checkbox"/> Junior	<input type="checkbox"/> Concession
	<input type="checkbox"/> Senior Non-Sailing	<input type="checkbox"/> Affiliate	<input type="checkbox"/> Social
	<input type="checkbox"/> Family	<input type="checkbox"/> Temporary	<input type="checkbox"/> Supporting
A Subscription Advice form MUST accompany this Application form			

GENERAL INFORMATION

Will you be sailing regularly?	Yes / No	Registered Sailor Number	
All club members who sail more than 3 times are required to register as a sailor (RRS 46)			
Can you swim?	Yes / No	Do you own your own boat?	Yes / No
Name of Boat		Class	Sail No.
Do you intend to crew?	Yes / No	With whom	
Name of Boat		Class	Sail No.
Were you previously a Club Member?	Yes / No	Year Resigned	
Other Club Members in the Family			
Emergency Contact		Phone	

DECLARATION

If this application is accepted, I agree to abide by the rules of the club.

Applicants Signature		Date	
Proposer Signature		Seconder Signature	
Name Printed		Name Printed	
The Proposer & Seconder must be Full Members of the Club with at least one year's membership			

Office Use:

Receipt N°	Receipt Date	Approved	New Member Night	Badge
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