

RUTLAND SAILING CLUB LIMITED

MEMBERSHIP APPLICATION

Please use BLOCK capitals and complete all sections. Where appropriate, write NONE or N/A

Applicant

M/F	Title	Surname	Forenames	Occupation	Date of Birth

Address

Telephone Numbers

Home

Emergency

Mobile

Work (if calls permitted)

Membership Category

Full Single

Family

Junior

Student

Crewing

Social

Email Address

Spouse or partner (if family membership requested)

M/F	Title	Surname	Forenames	Occupation	Date of Birth

M/F	Children under 16 (under 21 if in full time education)	Date of Birth

Other/Previous Sailing Clubs

Do you race? Yes No

Would you like an informal introduction to racing at RSC? Yes No

Please detail your sailing experience

Please give full details of certificates held or courses taken in the following : Race Officer, Power Boat, Rescue, First Aid

Proposer/Referee

Seconded/Referee

Name and address	Membership number if proposer
	<input type="text"/>

Name and address	Membership number if seconded
	<input type="text"/>

Proposed Craft							
Craft	Class	Name of boat	Sail number	Colour	Length (max 26ft)	Length with bowsprit/bumpkin	Weight (max 2 tonnes)
Optimist	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Sailboard	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Dinghy	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Catamaran	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Day boat	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cruiser	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Facilities Required				
Craft	Parking (max 27')	Mooring (max 26')	Trailer parking	Tender parking
Optimist	<input type="text"/>			
Dinghy	<input type="text"/>		<input type="text"/>	
Catamaran	<input type="text"/>		<input type="text"/>	
Day boat	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cruiser	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I agree to be bound by the Memorandum and Articles of Association, the Rules and the Bye-Laws of Rutland Sailing Club

I am in possession of a paid insurance certificate with third party cover for a minimum of £2,000,000. (It is a condition of membership that all water-borne craft are covered by an insurance certificate for third party risk.)*

Signature of applicant

Date of Application

Data Protection Act: All data supplied on this form will be entered into a computerised database for use by the Club administration. If you DO NOT wish this information contained herein to be transferred to other parties, please tick here.

OFFICE USE

Name of current member that this new member was introduced by.

NAME

MEMBERSHIP NUMBER