



come join the crew at **syc**

Junior Membership Application Form

I wish to become a Junior Member of the Sandringham Yacht Club and submit the following for consideration.

Family Junior Individual Junior

(Please tick which type of membership you are applying for)

Given Names: _____ Surname: _____

Address: _____

Suburb: _____ Post Code: _____

Home Phone: _____ Mobile: _____

Email: _____

Date of Birth: ____ / ____ / _____ Male Female

School: _____ Year: _____

Given Names (Mother): _____ Surname: _____

Given Names (Father): _____ Surname: _____

Sailing Experience: _____

Do you intend to actively engage in club activities? Yes No

And if so, in what manner (ie. C-Fleet, Junior Squad, Etc): _____

Do you propose to compete in Club events? Yes No

Names of any Yacht or other Club to which you now belong, or have belonged: _____

I, the undersigned, hereby declare that the foregoing information is true and correct in every particular.

Signed: _____ Date: ____ / ____ / _____

Print Name: _____

Membership Year is from the 1st April – 31st March the following year. Annual Subscription is **\$108.00**

P.T.O.



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Declaration by Proposer

(only refers to Individual Junior applications)

I know: _____

and have great pleasure in acting as Proposer on their application for membership of SYC.

Proposer: _____

Number of years known: _____

Signature: _____

Membership Type: _____ Member #: _____

Declaration by Seconder

(only refers to Individual Junior applications)

I know: _____

and have great pleasure in acting as Seconder on their application for membership of SYC.

Seconder: _____

Number of years known: _____

Signature: _____

Membership Type: _____ Member #: _____

Both Proposer and Seconder must be members of the SANDRINGHAM YACHT CLUB Inc. for at least 12 months.

I, (full name) _____ agree to the above Nomination and hereby apply for Junior membership of the SANDRINGHAM YACHT CLUB Inc. and if elected, agree to be governed by the Club’s Rules, Regulations and By-Laws.

Signed: _____ Date: ____ / ____ / ____

INDEMNITY FROM PARENT OR GUARDIAN

To the Chief Executive Officer
SANDRINGHAM YACHT CLUB Inc.

In accepting the application of my son/daughter or charge as a Junior member (between 8 and 18 years of age), I request that your Officers, Servants, Employees and Agents are to be free and clear of all liability and responsibility whatsoever for any accident, illness, negligent act or mis-adventure which may occur or befall him/her participating in any activity connected with the Club, and indemnify the Club, its Officers, Servants, Employees and Agents from and against all damage, claims and demands whatsoever in respect thereof. I further authorise you in the event of any accident, illness, negligent act or mis-adventure, to obtain any and all medical assistance and hospital accommodation that may be necessary and in this event I agree to pay all medical and like expenses and fees incurred on behalf of the said:

Signed: _____ Date: ____ / ____ / ____

Print Full Name: _____

Office Use Only

Date Received: ____ / ____ / ____

Date Of Selection: ____ / ____ / ____

Date Approved: ____ / ____ / ____

Approved By: _____