



2017 Redditch Sailing Club



Please sign and return to **Pete Gale, Membership Secretary, Redditch Sailing Club,
10 Central Road, Bromsgrove B60 2NR. 01527 877599**

IT IS ESSENTIAL THAT THIS FORM IS SIGNED AND RETURNED IN ORDER TO MEET HMRC & DATA PROTECTION LEGISLATION

Full Name: D.O.B. Boat Class and number:

please use Block Capitals

Address:

Mobile No:

Home Tel No:

e-mail

* Delete as applicable

please write clearly

* My membership status is **Full / Crewing / Junior / Associate & additional boat(s)**. *I am claiming an OAP Concession Rate.*

Please find attached my RSC subscription & fees for 2017 £ include your Joining fee of £25 (*Full & Crewing only*)

I will be paying my subscription for 2017 by Electronic Bank Transfer.

Name of Bank:

Full Members £230 (OAP £200), Crewing £115 (OAP £105), Junior £70 & Associates £20

Full Members Only:-

Family Members may be signed into the Club if they are **unlikely to reach the 12 annual participations**
All Family Members over 16 years old are expected to participate in Club Duties i.e. Rescue / Working Parties etc.

Full Members "Participating" nominated Family ~ complying with HMR&C regulations re Community Sports Clubs.

	<u>Full Name</u>	<u>Relationship</u>	<u>Year of Birth</u>	<u>e-mail address</u>
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I confirm that I have a minimum of £2m 3rd Party Insurance cover for any boat I keep at or use at the Club

I will abide by the Rules and Regulations of Redditch Sailing Club both now and in the future.

I agree that Redditch Sailing Club will store my personal details in their records and they will be used for Club administration purposes only.

My contact details will be made available to other members.

Signed:

Date:



Next of Kin details:

Name(s):

Relationship:

Tel: contact number(s)

