



# 2018 Redditch Sailing Club



Please sign and return to **Greg Croydon, Treasurer, Redditch Sailing Club,  
Wheelwrights, Callow Hill Lane, Redditch B97 5PT**

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

Full Name:

please use Block Capitals

Address:

Boats (Class and numbers):

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 2018  £  If new, include your Joining fee of £25 (*Full & Crewing only*)

I will be paying my subscription of £  for 2018 by Electronic Bank Transfer. Name of Bank:

**Full Members £230 (OAP £200), Crewing £115 (OAP £100), Junior £70 & Associates £20. PROMPT PAYMENT DISCOUNT AVAILABLE**

**Full Members Only:-** Full Members may nominate a spouse and children under 18 (or in FTE) as members if they are likely to be active within the Club. Other family members will need to be signed in when visiting.  
All Nominated Family Members over 16 years old are expected to participate in Club Duties i.e. Rescue / Working Parties etc.

### Nominated Family Members:

	<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"/>

### Data Protection and Rules:

- 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
- I agree that Redditch Sailing Club will store my personal details in their records and they will be used for Club administration purposes only, in line with the Data Privacy Policy
- I agree that my contact details may be made available to other members for Club purposes only
- I agree that my image may be used on our website or social media for promotion purposes

Please tick to acknowledge acceptance

  
  
  
  


Signed:

Date:

### Next of Kin details:

Name(s):

Relationship:

Tel: contact number(s)

