



SPRING BAY BOAT CLUB INC.

MEMBERSHIP APPLICATION

APPLICANT DETAILS

SURNAME:		GIVEN NAMES:		DOB: <small>(FOR AUSTRALIAN SAILING REGISTRATION)</small>	
EMAIL ADDRESS:			MOBILE NUMBER:		ALT PHONE NUMBER:
POSTAL ADDRESS:					
TOWN/CITY:			STATE:		POST CODE:

ARE YOU A MEMBER OF ANOTHER BOAT CLUB? (CIRCLE) YES NO
(IF YES PROVIDE DETAILS):

FAMILY MEMBER DETAILS

PLEASE PROVIDE DETAILS OF SPOUSE AND CHILDREN UNDER 18 YEARS ONLY IF YOU WISH THEM TO BE RECORDED AS MEMBERS

SURNAME:		GIVEN NAMES:		DOB: <small>(for AUSTRALIAN SAILING REGISTRATION)</small>	
MOBILE NUMBER:		EMAIL ADDRESS:		ALT PHONE NUMBER:	

BOAT DETAILS

MAKE OF VESSEL: <small>(EG RIVIERA 40)</small>			TYPE OF VESSEL: <small>(EG POWER CRUISER, YACHT, RUNABOUT)</small>		
LENGTH:		BEAM:		DRAFT:	
NAME OF VESSEL:		REGISTRATION NUMBER:		RADIO CALL SIGN:	

MEMBERSHIP PROPOSER AND SECONDER (must be current SBBC members)

PROPOSER'S NAME:		PROPOSER'S SIGNATURE:	
SECONDER'S NAME:		SECONDER'S SIGNATURE:	

APPLICANT'S DECLARATION

I hereby apply for membership for myself *(and eligible family members if applicable)* and agree to abide by the rules and bylaws of the Club.

Signature of applicant.....Date...../...../.....

REASONS FOR APPLYING FOR MEMBERSHIP

This section is optional but will assist the Club in providing the events and facilities desired.

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NOTES
 1. Single and family membership is currently \$100 per annum. There is no nomination fee.
 2. This form must be presented in a fully completed state. If an applicant cannot achieve this independently, (particularly with regard to proposer and seconder signatures), they are invited to attend the club during one of the club's Friday gatherings, before a Thursday committee meeting, or otherwise by appointment to seek assistance in completing this form.

Please forward applications to: **The Secretary** or via email to **sbcontact@gmail.com**
Spring Bay Boat Club Inc.
PO Box 88
Triabunna Tasmania 7190