

MEMBERSHIP APPLICATION FORM



Staines Sailing Club
105 Chertsey Lane
Staines. TW18 3LQ
email: info@stainessc.org.uk
www.stainessc.org.uk

1 Personal Details

Forenames	Surname
Occupations	

2 Children (under 18)

Names	Date of Birth
-------	---------------

3 Address

Postcode	Tel Nos:
----------	----------

4 Email

--

5 Boat Details

Class:	Sail No:
--------	----------

6 Declaration

<p>I wish to apply for *FAMILY\FULL\JUNIOR (under 18) membership of STAINES SAILING CLUB. I agree to be bound by the Rules of the club. I agree to the Club holding my personal membership data, including listing of my name and phone number in the Club programme. This data will not be shared with any person or company who is not a member of the club without your written permission and consent. I also consent to the Club taking and using my photograph in newsletters and on the club website, to promote the Club. Parents and guardians are warned that the club is only able to provide rescue facilities during the hours of club racing. Outside these hours parents and guardians have sole responsibility for their children and wards and must appreciate that the club cannot be expected to exercise supervision or control. Even during club racing the club cannot accept responsibility for children, or other persons, not engaged in racing.</p> <p style="text-align: center;"><i>* Delete as appropriate</i></p>

Signed (Parents or Guardians signature for Junior membership)

Signature	Date
-----------	------