

LSSC NEW MEMBERSHIP APPLICATION 2022/23

SAILING MEMBERSHIP*

	<u>FEEES</u>	<u>Discounted</u> <u>1st Year</u>	<u>Amount</u> <u>Payable</u>
1. Full Year membership discounted offer:			
Family membership.	£112.00	£84.00	£.....
Single membership.....	£92.00	£69.00	£.....
Cadet (age 14-17) or Student membership	£30.00	£15.00	£.....

NON SAILING MEMBERSHIP

Non-Sailing family member.....	£60.00	£30.00	£.....
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BOAT HIRE

Club Boat Hire	£130.00	£98.00	£.....
(runs concurrently with the membership year)			

2. Starter Membership (4 Month trial) offer: £50 £.....

Own Boat(s) Fees (cost to keep your boat in our compound)

Class	Sail No.	£84.00	£
Class	Sail No.	£84.00	£

TOTAL REMITTANCE

£
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Make cheques payable to: "LSSC" OR online using Sort code 40-27-06 Account No 52514028 AND include your name as the Reference.

Select your duty preference.- Please note – it is a condition of membership that all members are expected to carry out duties

Duty Preference	
Duty Offr	Galley

Your Name - main member.....

Spouse/partner(where applicable).....

Your Address.....

.....

..... **POST CODE**

Tel No **Mobile**.....

EMAIL **Date**.....

**Our membership year runs from 1 April 2021 to 31 March 2022. Fees are not pro-rated if joining part way through the year. New members joining in the last quarter (i.e. 1 January to 31 March) pay a full year's fee to include the following year (i.e. 15 months membership for 12 months fee).*

THIS DECLARATION MUST BE SIGNED BY ALL MEMBERS (EXCEPT CHILDREN UNDER 14)

I/We the undersigned:

Declare that I/we have read and fully understood the information leaflets “Weil’s Disease” and “Blue/Green Algae – The Facts”, and that in the event of any loss, damage, personal injury or death arising from contact with the water, I understand that Leamington Spa Sailing Club will not be liable for costs or damages because I have voluntarily accepted the risks associated with water contaminated by Weil’s disease or Blue-Green Algae,
(Information leaflets are on display within the Clubhouse and available on request)

AND

I will ensure that my boat(s) are insured against third party risks (minimum £3,000,000) at all times when on Club premises,

AND

I will, before commencing sailing or other duties, inform the Duty Committee of **any medical condition** I have that could occur during my activities at the Club,

AND

I am aware of the Club’s Health & Safety Policy objectives. I understand that I have a duty to take care of the health & safety of myself and others affected by my actions when on Club premises,

(A copy of the full Health & Safety Policy Statement is available on request)

AND

I agree to abide with the Byelaws of Leamington Spa Sailing Club.

(A copy of the Byelaws is available for inspection in the Clubhouse).

AND

I have read the LSSC Data Protection and Privacy Statement (copy available on LSSC website) and agree for my data to be used for the purposes stated in the Statement.

MEMBERS SIGNATURES (all members need to sign and date the form)

NAME SIGNATURE DATE

NAME SIGNATURE DATE

Cadet applicant (14-17 years old inclusive) must also obtain the signature of their parent/guardian to the section below:

“I have read the above and agree to(insert name of cadet applicant) being bound by the Club’s byelaws and other rules.”

Signed..... Date..... (Parent or Guardian).

CHILDREN UNDER 18 YEARS OLD

NAME OF CHILD D of Birth.....

NAME OF CHILD D of Birth.....

Membership Proposed by Seconded by