



APPLICATION FOR JUNIOR MEMBERSHIP

JUNIOR DETAILS

Title _____ Given Names _____ Surname _____ DOB ____/____/____

Home Address _____ P/Code _____

Postal Address _____ P/Code _____
(If different to above)

PARENT/GUARDIAN DETAILS

Ph: (Mobile) _____ (Home) _____ (Work) _____

Email _____ would you like to receive our email newsletter Yes No

Name of Employer _____ If Self Employed Business Name _____

Emergency Contact #1 _____ Ph: _____ Relationship to Applicant _____

Emergency Contact #2 _____ Ph: _____ Relationship to Applicant _____

TYPE OF MEMBERSHIP (please tick one):

JUNIOR (with Dinghy)
JUNIOR (without Dinghy)

	FULL YEAR	WINTER	SUMMER
JUNIOR (with Dinghy)	\$274.00	\$150.00	\$195.00
JUNIOR (without Dinghy)	\$358.00	\$185.00	\$250.00

REFEREE #1

Name _____ Occupation _____ Relationship to Applicant _____

Phone _____ Address _____ P/Code _____

REFEREE #2

Name _____ Occupation _____ Relationship to Applicant _____

Phone _____ Address _____ P/Code _____

PAYMENT METHOD

Cheque Cash Credit Card

I hereby authorise the Perth Flying Squadron Yacht Club (Inc.) to debit my credit card with the sum amount of \$ _____

Card Number _____ Expiry ____/____ CVV _____

Cardholder Name _____ Cardholder Signature _____

DECLARATION: I declare that all information contained herein is true and accurate. I agree to be bound by the Club Constitution, Rules and Policies.

Signature of Applicant _____ Date ____/____/____

OFFICE USE ONLY

Date Application Received		Entered on Computer	
Membership Number		Nomination Fee Paid	
Membership Fees Invoiced		Membership Pack Sent	
Approval and Signature of General Manager			