



PERTH FLYING SQUADRON YACHT CLUB INC.

APPLICATION FOR
JUNIOR MEMBERSHIP
2022/2023

(08) 9386 6437

members@pfsyc.com.au

www.pfysc.com.au

MEMBER DETAILS

TYPE OF MEMBERSHIP

	Full Year	Winter	Summer
Junior (with Dinghy)	<input type="checkbox"/> \$303	<input type="checkbox"/> \$167	<input type="checkbox"/> \$216
Junior (without Dinghy)	<input type="checkbox"/> \$397	<input type="checkbox"/> \$205	<input type="checkbox"/> \$277

JUNIOR DETAILS

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

Home Address _____ P/Code _____

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

PARENT/GUARDIAN DETAILS

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

Home Phone _____ Mobile _____ Email _____

Occupation _____ Employer _____

Would you like to receive our email newsletter? Yes No

PAYMENT METHOD

Credit Card Cash Cheque

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

Card No.

Expiry Date ____/____/____ CCV Signature _____ Date ____/____/____

DECLARATION

I declare that all information contained herein is true and accurate. I agree to abide by the Club Constitution, Rules and Policies, as amended from time to time.

Signature of Applicant _____ Date ____/____/____