



BROADSTAIRS SAILING CLUB

Seaview House Harbour Street Broadstairs Kent CT10 1EU Tel: 01843 861373

APPLICATION FOR MEMBERSHIP (NOT JUNIOR)

The information provided on this form will be used solely for dealing with you as a member of Broadstairs Sailing Club in accordance with the BSC Data Privacy Notice, a copy of which can be found on the BSC website. (All BSC forms are GDPR compliant)

Please complete all relevant sections in **BLOCK CAPITALS** and return to the Membership Secretary at the above address

Full Name:

Address:

Post Code: Telephone: Mobile:

E-mail: Age: (if student)

For Joint, Family and Single Parent memberships please list all other applicants. If under 18, include dates of birth.

Name: D.O.B. Name: D.O.B.

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Membership Categories: (Tick Box) Single Single Parent Joint Family Student

Subscription Fee Enclosed: £ Joining Fee: £

For current subscription rates please see the Club website. Fees will be returned in the event of non-acceptance.

Applicants are warned that the Club is only able to provide patrol boat facilities during organised Club sailing events. Outside these hours, members have sole responsibility for themselves and other family members. During organised Club sailing events the Club cannot accept responsibility for children, or any other person, not engaged in that event.

By signing I/we agree to abide by the Rules and Bye Laws of Broadstairs Sailing Club and to my/our personal information being stored for the duration of our membership and for a period of one year following resignation from the Club. From time to time members may be filmed (photographic and/or video images). I/we agree to any such images being included in newsletters, presentations and publicity material. If you would prefer images not to be used please tick here []

Signature of Applicant: **Date:**

Medical Disclosure (please give details of any medical condition that Club officials should be aware of or state **NONE**)

Name: Condition:

Signed (Parent): Print Name:

Name: Condition:

Signed (Young person 13 & over): Print Name:

NB: For your own safety should the condition change at any time please contact the Membership Secretary immediately.

Emergency Contact Details

Name: Mobile: Relationship:

Name: Mobile: Relationship:

Official use only:

Introductory Letter Sent: Accepted/Declined

Acceptance letter and Membership Pack Sent: Added to Database: