



BROADSTAIRS SAILING CLUB

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

APPLICATION FOR TEMPORARY MEMBERSHIP

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 or Officer of the Day at the above address

Full Name: Mobile:

E-mail: Age: (if under 18)

For Single parent, Joint and Family memberships please list all other applicants. If under 13, include dates of birth.

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

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

Membership Categories: Single Single Parent Joint Family Student Junior

Temporary membership will be for a maximum period of 14 days and members shall be entitled to all the privileges of the Club.

Temporary Subscription Fee Enclosed: £

Signature of Applicant: Date:

Signature of Elected Club Officer: Print: Date:

Parental Consent and Declaration for Temporary Junior Membership

I (parent/guardian name in full) consent to my child/ward becoming a Temporary Junior Member of Broadstairs Sailing Club. I certify that he/she is a confident in water.

Parents and guardians are warned that the Club is only able to provide patrol boat facilities during organised club sailing events. Outside these hours, parents and guardians have sole responsibility for their children or wards and must appreciate that the Club cannot be expected to exercise supervision or control. 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 up to 7 days following the end of the membership period. From time to time Club 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 Parent/Guardian 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:

Emergency Contact Details

Name: Mobile: Relationship:

Name: Mobile: Relationship:

Official use only: Signature of Flag Officer

Membership period: Starting: Ending: