



# Draycote Water Sailing Club.

Kites Hardwick Rugby Warwickshire CV23 8AB  
Tel 01788 811153 FAX 01788 811593

## MEMBERSHIP APPLICATION

BLOCK CAPITALS PLEASE

MEMBERSHIP NO: \_\_\_\_\_

PLEASE MAKE CHEQUES PAYABLE TO 'DRAYCOTE WATER SAILING CLUB LIMITED'

**TYPE OF MEMBERSHIP** (see fee sheet for details):

FAMILY ( ) INDIVIDUAL ( ) ASSOCIATE ( ) YOUNG PERSON 'A' ( ) YOUNG PERSON 'B' ( )

NAME \_\_\_\_\_ SPOUSE/PARTNER'S NAME/ EMERGENCY NUMBER \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CHILDREN'S NAMES: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

MOBILE: \_\_\_\_\_ MEMBERS DATE OF BIRTH ..... MEDICAL CONDITIONS.....

**YOUNG PERSON 'A' IN FULL TIME EDUCATION** PLACE OF EDUCATION: \_\_\_\_\_

MEDICAL CONSENT FORM COMPLETED ( )

EMERGENCY CONTACT DETAILS: NAME..... TELEPHONE NUMBER.....

**GENERAL INFORMATION:** ARE YOU ABLE TO SWIM? YES/NO

• OTHER SAILING CLUB MEMBERSHIPS: \_\_\_\_\_

• SAILING EXPERIENCE: \_\_\_\_\_

I hereby apply for membership of The Draycote Water Sailing Club Ltd. if elected, I agree to be bound by the MEMORANDUM and ARTICLES OF ASSOCIATION and the RULES and REGULATIONS made thereunder. I will undertake to do OD DUTIES when called upon to do so.

APPLICANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENTS SIGNATURE \_\_\_\_\_

ALL APPLICATIONS MUST BE PROPOSED AND SECONDED BY FULL MEMBERS  
We being full members of The Draycote Water Sailing Club Ltd PROPOSE and SECOND this application

Proposed by: Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Seconded by: Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**THE DRAYCOTE WATER SAILING CLUB LIMITED AND ITS OFFICERS AND SERVANTS DO NOT ACCEPT ANY LIABILITY ARISING OUT OF THE USE OF ITS PREMISES OR WATER BY MEMBERS OR THEIR GUESTS.**

### PTO FOR BOAT/BOARD DETAILS

The Draycote Water Sailing Club Ltd Registered in London No 974308  
Registered Office: Kites Hardwick, Rugby, Warwickshire CV23 8AB  
V.A.T. Registered No 272 6746 35

**BOAT/BOARD REGISTRATION DETAILS:**

BOAT CLASS: \_\_\_\_\_ BOAT NO: \_\_\_\_\_ SAILBOARD ( )

**INSURANCE DECLARATION**

I HEREBY CERTIFY THAT THE BUOYANCY EQUIPMENT IN MY BOAT IS IN GOOD CONDITION AND COMPLIES WITH ITS CLASS RULES AND THAT I HOLD THIRD PARTY INSURANCE COVER IN THE MINIMUM SUM OF £2,000,000 IN **ANY ONE ACCIDENT**.

I UNDERTAKE TO MAINTAIN THE BUOYANCY EQUIPMENT IN SUCH CONDITION AND THE INSURANCE COVER AS ABOVE WHILST THE BOAT IS REGISTERED IN MY NAME WITH THE CLUB.

I HEREBY CERTIFY THAT THE SAILBOARD AND EQUIPMENT REGISTERED IN MY NAME WITH THE CLUB IS IN GOOD CONDITION AND COMPLIES WITH THE RULES AND THAT I HOLD THIRD PARTY INSURANCE COVER IN THE MINIMUM SUM OF **£2,000,000 IN ANY ONE ACCIDENT**.

CLASS: \_\_\_\_\_ NUMBER: (if applicable) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**NOTE:** NO REGISTRATION STICKER OR SAILBOARD FLAG WILL BE ISSUED UNTIL THE ABOVE DECLARATION HAS BEEN SIGNED AND LODGED WITH THE SECRETARY.

**FOR OFFICE USE****PAYMENT**

MEMBERSHIP \_\_\_\_\_

BOAT/SAILBOARD \_\_\_\_\_

JOINING FEE \_\_\_\_\_

TRAINING CRSE/MISC \_\_\_\_\_

**TOTAL** \_\_\_\_\_

CASH/CHEQUE/CR CARD \_\_\_\_\_

DATE RECEIVED \_\_\_\_\_

COMMITTEE MEETING \_\_\_\_\_

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