

Family Friendly Sailing

Sutton Sailing Club Powells Pool Monmouth Drive Sutton Coldfield B73 6JL

MEMBERSHIP APPLICATION FORM

Name:					
Address:					
Post Code:			Tel No:		
Mobile No:					
Email address:					
Spouse/Partners'	Name:				
Children's Full Names		Date of Birth	Children's Full Names		Date of Birth
	,		·		
Boat Class		Sail Number	Boat Name		
			ſ	T	_
Membership Required: (Please see reverse of form or website for details of membersh				Fee:	£
types available & Fees wv				Boat Fee:	£
				Total:	£
Indicate your payment method all payments made out to 'Sutton Sailing Club'			Cheque Enclosed Y / N		
		ID	Online (See below for		Y / N
			details)		
Online payment can be n membership type as a re				785903. Use your su	ırname, initials and
membership type as a re	referee to ald p	ayment identification	1.		
Applicants are urged to	o read the RY	A leaflet "Blue Gree	en Algae the Fact	s" a copy of which	is displayed on the
club notice board. Acc				es not hold them I	iable in the event of
personal injury, loss, d	lamage or dea	th either for dama	ges or costs.		
Junior applicants must	obtain their p	arent's signature t	o the following st	atement:	
		5	5		
I approve of my Son/D		ming a member of	Sutton Sailing Cl	ub and I am confi	dent of
his/her swimming abili	ty for Salling.				
I hereby apply for mer					
Rules, and agree to a					
onto Powells Pool will	be covered by	at least £2,000,00	00 Third Party Inc	demnity insurance.	
Applicant's Signature:					Date
Parent's Signature (if under 18)					Date
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Please return this form (and cheque) to the Membership Secretary :-

Mike Hughes, 39 Emmanuel Road, Sutton Coldfield, B73 5LY Tel. No. 0121 382 6979

If paying online, please scan and email your signed form to: membership@suttonsc.org.uk and treasurer@suttonsc.org.uk