



EARLSWOOD LAKES SAILING CLUB

www.earlswoodsc.co.uk

APPLICATION FOR MEMBERSHIP 2010

Dear Guest,

Thanks for showing an interest in becoming a member for the 2010 season. We hope it will be a great season on and off the water and encourage you to get the best value out of your subs by taking part in as many activities as possible. The season opens with the Annual Prize Giving and Dance at the end of January and in March we will be Bingo-ing and Grand Splashing, we'll be Barn Dancing in May and holding the Summer Party in July, as well as the odd impromptu BBQ after sailing. We're a small club with a hardworking committee that want s to see you make the most of your Membership. Thanks in anticipation for your membership.

Terry Bridgewater, Commodore ELSC.

We'd also like an **emergency contact** for each member this year please. See the foot of this form.

Please enter your details below :

Name

Address.....

e-mail..... **repeat e-mail please**.....

Phone.....

Your email address will be added to the Club's email group address which allows the Club and its members – and only these – to communicate with everyone in the group.

Please tick here if you do not wish to be added. Information given on this form will be recorded on a computer for the EXCLUSIVE use of ELSC.

Class of Membership

BOAT OWNER (Family Member) Family Member = Owner, Partner, Son(s), Daughter(s) up to age 18 yrs.	£153	£
SINGLE BOAT OWNER (Boat Owner only)	£141	£
SENIOR CREW	£45	£
FAMILY CREW (Member, Partner & Children under 18 yrs of age)	£93	£
JUNIOR CREW (UNDER 18 YRS)	£25	£
SECOND BOAT / JUNIOR BOAT OWNER	£59	£
Joining Fee (one off payment)	£45	£
SOCIAL MEMBER	£28	£
CLUBHOUSE KEY (Please indicate whether you have one or not) (If you want a key please add a £20 deposit fee and it will be sent to you)	Yes/no	
LOCKER Rental (When available)	£5	£
Credit or Debit card payment fee (£2)	£	£
RULE 9 PAYMENT (FEB: + £3...MAR: + £6...APR: + £ 10.)	£	£
TOTAL PAYMENT (Cheques to E.L.S.C.)		£

Details of Boat

This must be insured for minimum racing cover

Class: Registered number:

I undertake to abide by the rules of Earlswood Lakes Sailing Club.

Signed: Date:

Please give below any dates when you are **unable to undertake the duties of OD or AOD** and return the **fully completed** form and cheques by email or by post to ...

James Patterson,
30 Littleover Avenue,
Hall Green,
B28 9HR.
james@jamespatterson.org

Please give details of any dates that you cannot do OD or AOD Duties.

For safety reasons at the club we would like to keep a record of somebody who can be contacted in an emergency if you were injured or needed medical attention. Please give details below. More than one may be listed.

Emergency Contact Name	Relationship to Member	Contact Number/s