



SOUTHPORT YACHT CLUB 70TH ANNIVERSARY CELEBRATIONS MEMBERSHIP SPECIAL

VALID UNTIL APRIL 30, 2017

MEMBERSHIP CATEGORY (please tick one)

- Social** ~~\$230~~ **\$99 ONLY**
- Family Sailing** ~~\$350~~ **\$149 ONLY** (includes parents & their children under 18years - please complete reverse)
- Associate** ~~\$100~~ **\$50 ONLY** (Must be with a financial Gold or equivalent Member)

(Payment, to accompany application, by cash, cheque, card or BPay by arrangement)

Mr/Mrs/Miss/Ms/Dr Surname _____ Given Names _____

Preferred Name _____ Date of Birth ____ / ____ / ____

Residential Address _____

Postcode _____

Postal Address _____ Postcode _____

Telephone - Home _____ Business _____ Mobile _____

Fax _____ Email _____

Company Name _____

Occupation _____ Business Activity _____

Boat Owner No/Yes Boat Name _____ Class _____

Interested in - **Sailing** - Offshore/Inshore/Cruising/Multihull/Dinghies **Power** -Navigation Rally Events/Cruising

Please tick for registration with Yachting Queensland for Sailor Identification Number (SIN) for competitive sailing/boating

Membership of other Clubs _____

You will receive SYC E-News via your email address. Please advise if not required.

How did you hear about SYC? SYC Member Friend As a Visitor As a Local Resident

Advertising Mail out Website Other _____

PROPOSER (Current Club Member)

_____ Membership No _____ Signature of Proposer _____

REFERENCES (Not necessarily Club Members)

Name _____ Phone _____ Name _____ Phone _____

If membership is granted, I hereby agree to subscribe to and be bound by the Southport Yacht Club Inc. Rules of Incorporation & By-Laws, and declare all particulars shown are correct.

Signature of Applicant _____ Date ____ / ____ / ____ Drivers Licence No. _____

** Please note: A surcharge of 3.5% applies to Amex and Diners Club transactions only.

*** Please be advised, by signing this, SYC Members who use the gym, do so at their own risk.

Please email Membership form to Membership@southportyachtclub.com.au



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FAMILY MEMBERSHIP

(PARENTS AND THEIR CHILDREN UNDER 18 YEARS)

Adult 2 Mr/Mrs/Miss/Ms/Dr Surname _____ Given Names _____
 Preferred Name _____ Date of Birth ____ / ____ / ____
 Telephone - Home _____ Business _____ Mobile _____
 Fax _____ Email _____
 Occupation _____ Signature _____

FULL NAMES of all Children under 18 years of age

Child 1 _____ Date of Birth ____ / ____ / ____
 Child 2 _____ Date of Birth ____ / ____ / ____
 Child 3 _____ Date of Birth ____ / ____ / ____
 Child 4 _____ Date of Birth ____ / ____ / ____

Privacy Act 1988 (Amended 2001)

The Southport Yacht Club Inc is committed to the privacy of your personal information such as your name, address, gender, etc supplied by you in your interaction with the Club under the *Privacy Act*. Southport Yacht Club Inc will use the information to provide its facilities and services to you and also plan new services and improve existing ones. The Club will only collect your personal information that is necessary for us to meet or fulfil our activities and functions. If you choose not to give the required information, your request for Club membership and access to Club facilities and services may be denied. The Club will seek your consent before releasing your personal information, where lawful and practicable and will only disclose your personal information to a third party and for secondary purposes to the extent provided by the *Privacy Act*. The Club will put in place appropriate measures to safeguard your personal information. You have the right to know what type of information is held about you by the Club and also the right to access and correct your personal information. The Club has a

OFFICE USE ONLY

Member's No:	\$	Received:	Date:
Pending Card No:			

Please email Membership form to Membership@southportyachtclub.com.au

07 5591 3500 / 1 Macarthur Parade, Main Beach QLD 4217

www.southportyachtclub.com.au