

GOLD COAST BOAT CLUB
P.O BOX 321
SOUTHPORT Q 4215

MEMBERSHIP APPLICATION FORM



Gold Coast Boat Club Inc
PO Box 321
SOUTHPORT QLD 4215
E: goldcoastboatclub@yahoo.com.au
W: goldcoastboatclub.org.au

Applicant Name: _____

Partner's Name: _____

Mailing Address: _____

P/Code _____

Home Phone No: _____

Mobile: _____

Business Phone No: _____

Email: _____

Children's Name: _____ D/O/B: _____
(under 18) _____ D/O/B: _____

_____ D/O/B: _____

_____ D/O/B: _____

Applicants Occupation: _____

Company Name: _____

Current/Previous member of any affiliated boat clubs Yes / No If so, which club/s _____

Recommended By: _____

VESSEL INFORMATION

Make	Model	Size	Boat Name	Reg No.
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Vessel 1: _____

Tender / Vessel 2: _____

Is Vessel Insured: Yes / No Fitted with Radio: Yes / No Type: 27MGZ / VHF

APPLICATION INFORMATION

Membership is on a financial basis (ie Jul-Jun). Annual renewal fee is due on 1st July each year and is currently \$174.50. Initial membership includes entrance fee, club pennant, membership sticker, Anchorage facilities key & building levy and is from date of application until June 30th. Initial application fee varies depending on the month joined, refer to table below for fees.

JAN	\$294.10	APR	\$252.55	JUL	\$377.00	OCT	\$335.65
FEB	\$280.25	MAY	\$238.70	AUG	\$363.35	NOV	\$321.80
MAR	\$266.40	JUN	\$224.85	SEP	\$349.50	DEC	\$307.95

PLEASE NOTE: Prices subject to change

All applications are required to sit on the table for 1 month for approval. If accepted at the monthly committee meeting an invoice for the required months application fee will be forwarded for payment.

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I hereby apply for membership, and if accepted, agree to subscribe to, and be bound by it's Constitution, By-laws and Code of Conduct. I also understand that full membership privileges apply for all persons listed on this form (children to the age of 18). Individual membership is available to persons over 18 years of age. Committee reserves the right to cancel any membership at any time for breaching of Club Rules and / or misconduct.

Signed: _____

Date: _____

Any additional information or comments can be placed on the reverse of this form. All fees are subject to change with notice.

OFFICE USE ONLY:	Date Application Form Received: _____	Date Membership Fees Received: _____
	Sit on Table Month of: _____	CHQ / MO Details: _____