

SOUTH QUEENSLAND SABOT ASSOCIATION INC.



MEMBERSHIP APPLICATION 2015-2016

1 April 2015 – 31 March 2016

You are invited to join the South Queensland Sabot Association Inc.
Please complete and return this Application and indicate your
Selected payment method.

Family Surname: _____

Father's / Guardian Full name: _____

Mother's / Guardian Full name: _____

Address _____ Post Code _____

Tel (h) _____ (w) _____ (m) _____

Sailing Club _____ email _____

Sailors

Name _____ YA Number _____ DOB/...../.....

Name _____ YA Number _____ DOB/...../.....

Name _____ YA Number _____ DOB/...../.....

I and my family agree to be bound by the constitution and appendices of the South Queensland Sabot Association Inc. and the Australian National Sabot Council. At Annual General Meetings, each family is entitled to one vote only, regardless of how many children sail.

Signature of parent/guardian Date

Annual membership fee

\$70.00 family membership plus \$10.00 registration fee per Sabot listed on page 2

\$10.00 late payment fee after 30 April 2015 (current members only)

Sabot Details

Registration of 7000-numbered Sabots is coordinated through the Australian National Sabot Council. All new Sabots or re-measured Sabots must register with the Australian National Sabot Council; and any buyer of a current 7000-numbered Sabot must transfer the ownership records. See www.sabot.au.com in the boat registration section.

BOAT No. _____ BOAT NAME _____

BOAT No. _____ BOAT NAME _____

Permissions (mark with an "x" to accept)

- ☐ **Training Indemnity:** ***must accept if participating in SQSA training.*** As the parent/guardian, I understand that sailing is a sport that is potentially hazardous to the participants. I consent for my Sailing Child/Children to attend scheduled SQSA training days. I understand that neither I nor my spouse (if applicable) in our own right, or on behalf of my/our Sailing Child/Children, have any recourse against the SQSA, its Committee, volunteers, host club, or coach for any losses, damages or injury suffered by my Sailing Child/Children while attending or participating in the program. I agree that in consideration of SQSA accepting this application I indemnify the SQSA in respect of any loss or claim howsoever arising.
- ☐ **Video Permission:** I give permission for the SQSA to record on-the-water video footage of my Sailing Child/Children for the purpose of SQSA sail training.
- ☐ **Photography Permission:** I give permission for the SQSA to take photographs of my Sailing Child/Children for inclusion in website/brochures for the purpose of Sabot class promotion.
- ☐ **Share contact details:** I give permission for my name and mobile number to be listed on an SQSA membership roster for sharing only with other SQSA families.

Notes

1. Payment Method (select one):

- ☐ Direct debit (preferred method) to Bank of Queensland, BSB 124 001, Account 10-342391, and Family name in Description box. Date of bank transfer:
- ☐ Cheque payable to "South Queensland Sabot Association Inc."

2. **SQSA Membership fees** due 1st. April 2015. SQSA membership and regatta fees contribute towards SQSA dues to Yachting Queensland and others; insurances; rescue boat operation and maintenance; website; host club regatta fees; awards; and promotions. SQSA Members are entitled to compete in SQSA regattas and training, and National Sabot events.

3. If you have **sold your Sabot**, please advise the Registrar of the details of the new owner.

Scan/email completed application to:

SQSA Registrar Andrew Richmond
treasurer@sqsa.org.au

SQSA Use Only:

- Contact list
- Payment Received
- Database