

HYC MEMBERSHIP APPLICATION FORM - APPLICANT'S DETAILS

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| *Membership Type: | | |
| *Have you ever been a member of HYC in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| *First & Last Name: | *DOB: | *GENDER: |
| * Residential Address: | | |
| *Suburb: | *State: | *Postcode: |
| *Postal Address: | <input type="checkbox"/> *Same as residential | |
| *Suburb: | *State: | *Postcode: |
| *Contact Details: | | |
| *Email: | | |
| Hm: | Wk: | *Mb: |
| Occupation: | Employer: | Type of Business: |
| *Spouse/Partner Details: <i>(Only applicable to Ordinary, Transitional, Senior, Clubhouse Partnered and Associate)</i> | | |
| First & Last Name: | *DOB: | *GENDER: |
| *Partner Email: | *Partner Mb: | |
| *Children under the age of 18 years: <i>(Only applicable to Ordinary and Transitional)</i> | | |
| *Child (1) <18yrs: | *DOB: | *GENDER: |
| *Child (2) <18yrs: | *DOB: | *GENDER: |
| *Child (3) <18yrs: | *DOB: | *GENDER: |
| *Child (4) <18yrs: | *DOB: | *GENDER: |
| Please complete below if applicable to your membership type: | | |
| JUNIOR MEMBERSHIP: | | |
| *Emergency Contact Name, Relationship & Number: | | |
| CREW MEMBERSHIP: <i>(Applications must be submitted with Written Certification from the Skipper of the vessel they regularly crew on)</i> | | |
| *Skipper's Full Name: | *Boat's Name: | |
| *Emergency Contact Name & Number: | | |
| CORPORATE MEMBERSHIP: | | |
| *Business Name: | *ABN: | |

TELL US ABOUT YOURSELF

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| How did you find out about us? | | |
| <input type="checkbox"/> HYC Website | <input type="checkbox"/> Advertising | <input type="checkbox"/> Drive Past |
| <input type="checkbox"/> Club Member | <input type="checkbox"/> Friend | <input type="checkbox"/> Other |
| What motivated you to join the Hillarys Yacht Club? | | |
| <input type="checkbox"/> Location | <input type="checkbox"/> Pen/Boat Facilities | <input type="checkbox"/> Social Facilities |
| <input type="checkbox"/> Family Participation | <input type="checkbox"/> Other | |
| In which activities do you wish to actively participate? | | |
| <input type="checkbox"/> Angling | <input type="checkbox"/> Diving | <input type="checkbox"/> Power Boating |
| <input type="checkbox"/> Social | <input type="checkbox"/> Keelboat Cruising | <input type="checkbox"/> Dinghy Sailing |
| <input type="checkbox"/> Keelboat Racing | <input type="checkbox"/> Paddle | |
| Do you wish to have a Section Representative contact you from the above selected on-water activities? | | |
| | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Our compass magazine is available online. Do you wish to receive a printed copy of our Compass magazine? (available for pickup from Reception) | | |
| | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you a boat owner? | | |
| | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Boat Name: | Overall Length: | Make: |
| Registration No: | Type of Boat: | Location of Vessel: |

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| Have you ever been expelled, suspended from, or refused membership of any club or association? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Has anyone listed on this application have criminal convictions? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If joining as a Corporate member, is your company in a position to help the club? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

| PROPOSER/SECONDER | | |
|---|------------------|---------------|
| <i>NOMINATION FOR MEMBERSHIP TO BE PROPOSED AND SECONDED BY TWO (2) CURRENT FINANCIAL MEMBERS OF HILLARYS YACHT CLUB.</i> | | |
| PROPOSER: | SIGNATURE: | HYC No: |
| SECONDER: | SIGNATURE: | HYC No: |

| PAYMENT | |
|--|---|
| Complete the following section for Credit Card payments <i>(surcharge of 0.72% applies to transactions greater than 909.50)</i> | |
| <i>I hereby authorise Hillarys Yacht Club INC to debit my credit card for the following fees (please select):</i> | |
| <input type="checkbox"/> Membership fee: | \$ <i>(Membership fees charged on a pro rata basis after 1st May. Please contact the office for pro rata fees)</i> |
| <input type="checkbox"/> Nomination fee: | \$407.00 <i>(NOT applicable to Clubhouse, Junior, Student, Associate and Crew) NON REFUNDABLE</i> |
| <input type="checkbox"/> Food & Beverage Levy: | \$145.00 <i>(Only applicable to Ordinary, Senior, Transitional, Corporate, Associate & Clubhouse)</i> |
| Total: | \$ |
| Card No: _____ | Expiry Date: ____ / ____ |
| Name on Card: _____ | Cardholder Signature: _____ |
| Should you prefer an alternative payment method, please indicate your preferred method below: | |
| <input type="checkbox"/> | By phone <i>(you will receive a call from the Club after submitting your application)</i> |
| <input type="checkbox"/> | Bank transfer <i>(a statement will be emailed to you with Club banking details)</i> |
| <input type="checkbox"/> | In person <i>(for applications handed in to reception during office hours)</i> |

| DISCLAIMER |
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| <i>From time to time, Club members and visitors may be photographed and/or videoed by Hillarys Yacht Club, Australian Sailing and/or parents/spectators whilst participating in training courses, Club training, Club racing and/or Club organised events to be used in publications approved by Hillarys Yacht Club and Australian Sailing. Information from the membership application may be handed to Australian Sailing for the purpose of allocating Australian Sailing numbers to Club members.</i> |

| DECLARATION | |
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| <i>I, declare that the information set out herein is true and correct and hereby agree, if accepted, to be bound by the Rules, By-Laws and regulations of HILLARYS YACHT CLUB Inc (copies of which are available upon request) and understand to observe the same and will participate in all activities of the club as required. Misleading or untrue information may result in membership not being accepted or terminated.</i> | |
| SIGNED: | DATE: |

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| The completed Membership Application can be submitted either by email to Club Admin or in person at reception. | |
| Email: | admin@hillarysyachtclub.com.au |
| Address: | 65 Northside Drive, Hillarys WA 6025. |
| PH: | 08 9246 2833 <i>(Club office hours are 9.00am-5.00pm, Monday to Friday).</i> |

