



**KIRCUBBIN SAILING CLUB**

106 Shore Road, Kircubbin, BT22 2RP

**APPLICATION FOR MEMBERSHIP**

Please print clearly

1. TYPE OF MEMBERSHIP REQUESTED (please circle)      Family      Full      Junior  
House      Outport      Intermediate

2. Full Name \_\_\_\_\_ DOB \_\_\_\_\_  
Address: \_\_\_\_\_  
Post Code \_\_\_\_\_ Telephone: Home \_\_\_\_\_ Mobile \_\_\_\_\_  
Email (please include) \_\_\_\_\_

3. If Family membership  
Name of Spouse / Partner: \_\_\_\_\_ DOB \_\_\_\_\_  
Names and DOB's Children: \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ DOB \_\_\_\_\_

4. ALL APPLICANTS (Not crew or Outport)  
Do you have a boat? (Include tenders, Ribs, etc.)      (Please circle)      Yes      No  
If yes      Class/Type/LOA: \_\_\_\_\_  
Name(s) \_\_\_\_\_  
If No      Do you intend to buy one after joining?      (Please circle)      Yes      No  
If Yes, please give details:  
Class/Type/LOA: \_\_\_\_\_

Will you require winter hard-standing space?      (Please circle)      Yes      No  
Please provide the name of your insurance company \_\_\_\_\_  
Date of expiry of current policy \_\_\_\_\_

5. Are you currently a member of a Yacht Club?      (Please circle)      Yes      No  
If yes, please give details: \_\_\_\_\_  
Have you ever had membership of another club terminated?      (Please circle)      Yes      No

6. How many years have you been sailing? \_\_\_\_\_

RYA or other relevant qualifications? \_\_\_\_\_

Type of boat(s) sailed: \_\_\_\_\_

Do you propose to take part in club racing? (please circle Yes No)

7. Please tell us why you want to join the kircubbin Sailing Club, and how you could contribute to the club.

**If elected to membership I would be prepared to participate in Club activities including serving on committees, doing bar duty, helping at work parties, etc. I agree to abide by the Constitution and Rules of the Club.**

**Any information given that is found to be false will result in termination of membership.**

**Signature of Applicant** \_\_\_\_\_

**Date** \_\_\_\_\_

Proposer (Name) \_\_\_\_\_

Secunder (Name) \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

**Proposer, please state your reasons for recommending the applicant, including how long you have known them and in what capacity.**

Cont'd if required.

**8.** In order to comply with current legislation, particularly the Children (Northern Ireland) Order 1995 regarding Child Protection, the applicant is asked to complete this section. This applies to both adults for family membership.

Have you ever been convicted as a result of criminal proceedings (Rehabilitation of Offenders Act 1974 Exemption Order 1975)?

Please circle

Yes                  No

Do we have your permission to carry out a police check?

Yes                  No

Applicant's Signature(s): \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_  
Date \_\_\_\_\_

**Completed forms must be returned to: Hon. Treasurer, Kircubbin Sailing Club, for consideration at Committee Meetings held on 2nd Monday of each month.**

**There is a joining fee for Family and single Adult applications, to "buy in" to the recent investment in the Club's facilities. If accepted, your membership will become valid when this fee is paid.**

\* Office use only:

Received \_\_\_\_\_ Accepted -Date of joining \_\_\_\_\_

Not Accepted

Letter of invitation sent \_\_\_\_\_