N A S

The Treasurer

To:

MEMBERSHIP RENEWAL FORM

NEWTON ABBOT SAILING CLUB

Date of birth (if under 18)

Signature of parent / guardian if under 18.

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e-mail address.....

Mrs Susan Rendell Newton Abbot Sailing Club 26 Charles Road Kingskerswell Newton Abbot TQ12 5JW Tel. (01803) 872369. I enclose £ being payment for the current year (please tick): -Family Membership £60.00 Single Membership £40.00 Junior Membership £25.00 **Boat Parking** for 6 months. (1st October to 31st March) £50.00 for 6 months. (1st April to 30th September) £50.00 £50.00 for 6 months or £5 per session. Use of Club Boats **DETAILS OF BOAT** Class Sail No Name Measurement Certificate. Yes / No. If more than one boat is stored in Newton Abbot S.C. dinghy park, a separate form must be used for each boat and a separate fee must be paid for each boat. **INSURANCE** The following declaration must be signed and, if required, you are to produce all policies and premium receipts for inspection by the Treasurer at any time. I (Full Name) declare that I hold a valid and current certificate of insurance having a minimum indemnity of £2,000,000 against third party risks for the above boat which covers me while sailing and racing and that I will continue to be so covered whilst sailing or racing under the auspices of the Newton Abbot Sailing Club. Signature Date Name Address

Are you willing to have your telephone number divulged to other club members? Yes / No.

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Post Code

Tel. No. (.....)

Please check availability of boat parking spaces with the Treasurer.	Tel. No. (01803) 872369.