

TWIN BRIDGES CRUISING CLUB INC.
1 / 205 West Street, Umina Beach 2257



Commodore: Garry Donaldson

Secretary: John Platt

Email: twinbridgescruisingclub@gmail.com

MEMBERSHIP APPLICATION FORM

I wish to apply to become a Twin Bridges Cruising Club member and, if accepted, agree to abide by the rules of the Club.

NAME:

EMAIL:

ADDRESS:

HOME ADDRESS: POST CODE:

PHONE: HOME: BUSINESS: MOBILE:

CREW / PARTNER:

PREFERRED METHOD OF CONTACT: EMAIL or POST

NAME OF VESSEL:

REG No:

BRAND, TYPE & LENGTH OF VESSEL:

MOORING / BERTHING LOCATION:

PAYMENT ENCLOSED FOR

- 1. Boat Membership Annual Fee (includes membership for Applicant & Crew). **\$235.00**
- 2. One off joining fee including club pennant. **\$50.00 Total \$285**

SIGNED by APPLICANT: DATE.....

NOMINATED BY: (must be an existing Club Member)

SIGNED BY NOMINATOR.....

COMMITTEE REVIEW / APPROVAL (All committee members to be consulted and agree on membership.

If a decline by any committee member is noted, then the membership is considered declined 😞

Committee reviewed: YES / NO

Membership Agreed:

YES / NO

Office Use Only

Date Approved Membership No.....

Payment Received \$..... Authorising Officer.....