

 SOCIAL MEMBERSHIP APPLICATION

**July 2017- June 2018 for just $5**

|  |
| --- |
| **Full Name**  |
| **Mailing Address** |
|  |
| **Email Address** |
| **Contact Phone Number** |
|  |
| **Signature:** |

If accepted as a member of the Whitsunday Sailing Club, I agree to be bound by the Constitution, By Laws, Privacy Policy and regulations of the club at all times.

Social members receive

discounts on the bar & bistro and Entry into the Friday members draw

Payment method: cash cheque Mastercard Visa

Card number Expiry Date

Cardholder Name Signature

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Office to complete

Proposer Name Proposer Signature

Seconder Name Seconder Signature

Proof of Identity: Driver Licence Other

Staff member’s name accepting application

Amount Paid Receipt No.

Date membership accepted

Membership No. Card Issued