

JUNIOR SAILING PROGRAMME MEMBERSHIP CONSENT FORM



Candidate Details:

Session Block ✓	1 of 10 Weeks				2 of 10 Weeks			
Syllabus Stage	1	2	3	4	1	2	3	4

Name of Child

Date of Birth

Name of Parent or Guardian

Home Address:

Postcode:

Telephone No:

Parent/Guardian email:

School Attended

Medical conditions that may be relevant to club activities:

- I consent to these details being held on the PSC's database.
- I request for my child to be nominated as a candidate for membership of Penmaenmawr Sailing Club, (if not a member already). And that he/she will undertake if elected, to conform to the rules of the club.
- I consent for my child to undertake the relevant introduction to sailing course.
- I understand that the course fees are to cover the maintenance costs for the equipment.
- During the time my dependent is attending I will be in or around Penmaenmawr Sailing Club or I will inform the coach in writing who is acting in loco parentis during my absence.

I would be able / unable to provide voluntary assistance if required – please delete as necessary

Signature:

Name in Capitals

Date:

The signature MUST be of a parent or guardian.
In case of emergencies, please provide:

CONTACT NAME:

NUMBER:

Declaration:

Subscription Details: Please tick applicable box Current Rates Paid Already

Child included in Family Membership for this season	<input type="checkbox"/>	0.00	<input type="checkbox"/>
Junior Membership	<input type="checkbox"/>	30.00	<input type="checkbox"/>
Level 1 & 2 Programme	<input type="checkbox"/>	25.00	<input type="checkbox"/>
Level 3 Pico	<input type="checkbox"/>	25.00	<input type="checkbox"/>
Level 3 Laser	<input type="checkbox"/>	35.00	<input type="checkbox"/>

TOTAL DUE	<input type="text"/>
Method of Payment (Cheque/Cash)	<input type="text"/>
Initials of Treasurer when paid	<input type="text"/>

Notes:

This form is supplementary to the normal Junior Renewal / Nomination forms, but may be used in lieu of either. If your child is already a paid-up member, or you have already made payment for the course, please indicate above.

This form will require completion before your child will be allowed to participate in any club training activities.

Our Club Racing Coaches run our training courses, with assistance from our Mentors, on a voluntary basis, and any assistance you could offer would be gratefully accepted

For a new membership, existing adult members must complete this part, which can be arranged easily at the club.

Proposer
Print name: _____
Sign:- _____

Seconder
Print name: _____
Sign:- _____

FOR COMMITTEE USE ONLY

Date Elected / /

Signature of Commodore _____

Return Form to:

Mr C.PETCH, Hon Secretary
HENLLYS, GILFACH ROAD, PENMAENMAWR, LL34 6HW
Tel: 01492 622844