

Mooloolaba Yacht Club Ltd Membership Renew / Application for 2017/18

ABN 52 010 100 580

e: mooloolabayachtclub@bigpond.com www.mooloolabayachtclub.com.au

PLEASE FILL OUT ALL DETAILS

mem ecob						
CATEGORY OF MEMBE (If applying for Family	RSHIP (see below or Corporate Mem	for details): bership, please u	DO YOU R	EQUIRE A YA SILV	ER CARD ? YES / NO _ ete all member detail	
MR / MRS / MS / MISS	SURNAME:		FIRST NAI	FIRST NAME(S):		
POSTAL ADDRESS:						
				POSTCODE:		
MOBILE NO:						
EMAIL:						
DATE OF BIRTH:		SIGNATURE:				
			our vessel listed on the			
BOAT NAME:		SAIL NO:				
MAKE: RATING/ LENG	ГН:	YPE:		REG NO:		
(A copy of the boat's o	urrent Insurance C	ertificate and Saf	ety Form must be lodge	ed with the MYC e	ach year)	
MEMBERSHIP CATEGO	ORY (please select	appropriate cate	egory)			
Membership Category				Amou	unt Payable	
Senior Member	active sailor (i	active sailor (includes YA silver card \$77)			\$260.00 (NOTE: \$242 if paid before June 30, 201)	
Supporter Member	includes 2 free	includes 2 free spile (ne veta)			\$90.00	
Family		includes 3 free sails (no vote) includes one YA silver card (one vote)			\$90.00	
Youth		(up to 18 yrs) YA silver card additional \$40			\$35.00	
Intermediate		(19-25 yrs) YA silver card additional \$77			\$100.00	
Social	, ,	Club member privileges only (no vote, non-sailing)			\$50.00	
Corporate		up to 5 members (one vote) YA silver card additional \$77			\$500.00	
Life Member	YA provide silv	YA provide silver card \$100.00				
Payment						
Account Name: Mooloolaba Yacht Club BSB: 014650			Account # 496 899 338	Refe	rence:	
Please return this form w	ith your cheque/money	order or confirmation	on of your direct deposit/cre	dit card and amount p	oaid to the MYC office.	
You must enter your surn	ame as a reference. Cr	edit card payment at	tracts a 2.6% transaction fe	e.		
ease return completed fo	·	•	rect debit, credit card cor	nfirmation payment	details to	
Thank you for supporting	g the Mooloolaba Ya	cht Club. Your mem	nbership card will be sent	to you once your pa	ayment is received.	
OFFICE USE ONLY						
Rec'd Date\$		Cash / Chq / DD Receip	t#	Dissection	Boat Insurance	
MYC Database YA D	base Paid (Card <u>Ha</u>	andbook <u>Letter</u>	YA Database	Safety Form	

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FAMILY & CORPORATE MEMBERSHIP

YA silver card additional \$77

Pleas state name of person nominated as the Voting Member:

MR / MRS / MS / MISS SURNAME:		FIRST NAME(S):		
POSTAL ADDRESS:				
SUBURB:	STATE:	POSTCODE:	DATE OF BIRTH:	
MOBILE NO:	DAY CONTACT:		DO YOU NEED A YA SILVER CARD ? _	
EMAIL:				
MR / MRS / MS / MISS SURNAME:	FIRST NAME(S):			
OSTAL ADDRESS:				
SUBURB:	STATE:	POSTCODE:	DATE OF BIRTH:	
MOBILE NO:	DAY CONTACT:	DO YOU NEED A YA SILVER CARD ?		
EMAIL:				
MR / MRS / MS / MISS SURNAME:	FIRST NAME(S):			
POSTAL ADDRESS:				
SUBURB:	STATE:	POSTCODE:	DATE OF BIRTH:	
MOBILE NO:	DAY CONTACT:		DO YOU NEED A YA SILVER CARD ?	
EMAIL:				
MR / MRS / MS / MISS SURNAME:	FIRST NAME(S):			
POSTAL ADDRESS:				
SUBURB:	STATE:	POSTCODE:	DATE OF BIRTH:	
MOBILE NO:	DAY CONTACT:		DO YOU NEED A YA SILVER CARD ? _	
MAIL:				
MR / MRS / MS / MISS SURNAME:		FIRST NAME(S):		
POSTAL ADDRESS:				
SUBURB:	STATE:	POSTCODE:	DATE OF BIRTH:	
MOBILE NO:	DAY CONTACT:		DO YOU NEED A YA SILVER CARD ? _	
EMAIL:				