



KURING-GAI MOTOR YACHT CLUB

## MEMBERSHIP

# BOAT OWNER / PART BOAT OWNER

I wish to nominate for Membership of Kuring-Gai Motor Yacht Club:

Surname\* \_\_\_\_\_ Given names\* \_\_\_\_\_

Home address \_\_\_\_\_

Suburb \_\_\_\_\_ Post Code \_\_\_\_\_

(If not as above)

Postal address \_\_\_\_\_

Suburb \_\_\_\_\_ Post Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ Mobile\* \_\_\_\_\_

Email \* \_\_\_\_\_

Occupation \_\_\_\_\_

Name of firm / organisation \_\_\_\_\_

Memberships of other Clubs \_\_\_\_\_

### SPOUSE / PARTNER

Surname \* \_\_\_\_\_ Given Name\* \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

\* These details will be published in KMYC's annual Year Book, please tick here if you do NOT want them published

How did you hear about KMYC? \_\_\_\_\_

### PARTICULARS OF VESSEL

I am  OWNER  PART-OWNER of \_\_\_\_\_

(Name of Vessel)

Type of Vessel  MOTOR CRUISER  YACHT  MOTOR SAILER  HOUSEBOAT

Make \_\_\_\_\_ Length \_\_\_\_\_ (in feet)

Material \_\_\_\_\_ Beam \_\_\_\_\_ Draught \_\_\_\_\_

Weight \_\_\_\_\_ Registration No. \_\_\_\_\_

COPY OF BOAT'S CURRENT RMS REGISTRATION CERTIFICATE ATTACHED

CONTINUED OVER PAGE

# BOAT OWNER / PART BOAT OWNER

## APPLICATION FOR MEMBERSHIP CONTINUED...

### INSURANCE FOR VESSEL

Name of insurance company \_\_\_\_\_

Policy No. \_\_\_\_\_ Expiry Date \_\_\_\_\_

Amount of third party personal & property damage \$ \_\_\_\_\_

(Note a minimum third party cover of \$10,000,000 is required)

COPY OF CURRENT CERTIFICATE OF CURRENCY ATTACHED

KMYC mooring required?  YES  NO If yes, do you require dinghy storage?  YES  NO

If no KMYC mooring is required, where is your boat moored? \_\_\_\_\_

### PROPOSAL DETAILS

Name of Proposer \_\_\_\_\_

(Must be a current member of KMYC)

Remarks of Proposer \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_

Name of Seconder \_\_\_\_\_

(Must be a current member of KMYC)

Remarks of Seconder \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_

### MEMBERSHIP AGREEMENT

I hereby agree, if elected as a member of KMYC, to abide by the Constitution and By-Laws of the Club, the decisions of the General Committee and to pay all my accounts upon receipt.

I would like to receive quarterly financial updates of the Club

I would like to be contacted to quote for relevant Club work

Signature of applicant \_\_\_\_\_

Date of application \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### COMPLETED FORM TO BE RETURNED TO CLUB SECRETARY:

Email : OFFICE@KMYC.COM.AU

Post : KMYC, PO Box 189, Terrey Hills, NSW, 2084