



# Princess Royal Sailing Club

## Application for Membership

PO Box 345 Albany WA 6332  
Chipana Drive Little Grove WA 6330  
Phone: (08) 98 444 033  
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Email: [office@prsc.com.au](mailto:office@prsc.com.au)  
Web: [www.prsc.com.au](http://www.prsc.com.au)

I hereby make application to become a member of **PRINCESS ROYAL SAILING CLUB INC.**  
In the event of my election I agree to be bound by the constitution and rules of the club.

Type of Membership:      Full     Junior     Crew     Social

Name in Full: .....

Postal Address: .....

Date of Birth: \_\_ / \_\_ / \_\_\_\_

Occupation: .....

Telephone.....Mobile.....

Email Address: .....

Emergency Contact: ..... Phone: .....

Signature: .....

### General Information:

Do you have previous experience/interest in Yachting?      Y / N

Will you be/like to be a sailing member?      Y / N

Would you be interested in crewing opportunities?      Y / N    Social Y / N ; Racing Y / N

Would you be willing to assist in Club Activities?      Y / N

If Yes - What special skills would you be willing to offer?

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### Do you bring any of the following skills?

Recreational Skipper Ticket    Y / N    if yes please provide details .....

National Power Boat Handling Cert or Equivalent    Y / N    if yes, details .....

Safety Rescue Certificate      Y / N    if yes please provide details .....

Senior First Aid                      Y / N    if yes please provide details .....

Marine Radio Op VHF Cert.    Y / N    if yes please provide details .....

### Yacht/Boat Owners:

Vessel Name: .....      Length: .....

Sail No: .....      Class: .....

Do you require Pen / Hardstand / Rack:    Y/N: Which? .....

We hereby nominate the above candidate as a member of the Club.

Proposer: .....

Seconder: .....

Date: \_\_ / \_\_ / \_\_\_\_