



MEMBERSHIP APPLICATION / RENEWAL PACK

NEW MEMBERS should read the conditions of membership shown in this pack and should complete the Application Form in full.

CURRENT MEMBERS need only complete sections of the Membership Application/Renewal Form marked with # together with any other section where there are changes from the previous year.

ALL MEMBERS must sign the declaration at the bottom of the form to confirm their agreement to the terms and conditions of membership.

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IF YOU OWN A BOAT WITH SLEEPING ACCOMMODATION, then also please complete and include the Boat Information Form. Boat owners whose boats are currently registered with Channel Sailing Club, need only complete the sections where there are changes from previous declarations.

Completed forms should be returned with the appropriate fee (see 1st paragraph, page 3) to:-

**Jane Shott, Membership Secretary,
39 Ralliwood Road, Ashted, Surrey, KT21 1DD
Tel 01372 279971**



CHANNEL SAILING CLUB LIMITED



NOTES FOR AGREEMENT BY ALL PERSONS APPLYING FOR FULL, ASSOCIATE OR RENEWAL OF MEMBERSHIP

Your signature on the Membership Application/Renewal form will confirm that you have read and agree to abide by the following conditions when taking part in events organised by Channel Sailing Club ('The Club')

Classes of Membership

Full Membership of "The Club" is open to:

Persons who are 18 years old and over and who are undertaking or have successfully completed a course of navigation approved by "The Club". This includes the RYA Day Skipper Shore-based course and Merchant and Royal Navy watchkeeping certificates.

Persons who have demonstrated their support for the objects of "The Club", during a period as Associate Members, by participation in sailing events organised by "The Club" or otherwise.

Associate Membership of "The Club" is open to:

Any person who supports the objects of "The Club" (to promote such activities as shall further the skills and art of navigation, seamanship and sailing), but who is not eligible for full membership.

A Joint Subscription Full and Associate Members, living at the same address, may apply for a reduced fee. You will only receive one copy of 'Wavelength', the club's official magazine. Please complete individual application forms and staple them together.

All membership applications and applications to progress from Associate to Full membership are subject to the approval of the General Committee.

Agreement by all Boat Skippers/Owners on CSC Events

Applicable to all events: I acknowledge that it is up to me personally to assess whether any event or activity on the water is too difficult for me, and whether or not my personal safety or that of the crew would be endangered. I acknowledge that the safety of my boat, her crew and her entire management including boat insurance is my responsibility.

I declare that I am physically fit to go to sea, in possibly changing conditions. I understand the possible dangers and in the event of any personal injury or other loss the responsibility (if any) rests with myself and / or the owner and not with the event organisers or Channel Sailing Club

I declare that I will notify at least one member of my crew, on any event in which I take part, if I suffer from any medical condition or have any medical requirement which could be significant during the event.

Agreement by all Crew Members on CSC Events

I understand that Channel Sailing Club is not warranting the seaworthiness of any boat or the competence of any crew or skipper. I agree that I must satisfy myself as to seaworthiness and competence and that I should make my own insurance arrangements.

I declare that I am physically fit to go to sea, in possibly changing conditions. I understand the possible dangers and in the event of any personal injury or other loss the responsibility (if any) rests with myself and/or the skipper or owner of the boat and not with the event organisers or the Channel Sailing Club. I declare that I will notify the skipper of the boat on which I am taking part in any club-organised event, if I suffer from any medical condition or have any medical requirement which could be significant during the event.

I agree to pay to the skipper my share of the direct costs of any event in which I take part.

If I am under the age of eighteen at the time of any event in which I take part, I must have a written authority signed by a parent or guardian acknowledging that these conditions have been read and agreed. I must be accompanied by a parent or guardian at all times while on board.

Agreement by all CSC Members

I understand that it is a condition of Membership of Channel Sailing Club Ltd that I have read and agree to abide by the Club Rules.

Data Protection Act 1998

The information which you provide in this form and any other information obtained or provided during the course of your application/renewal for membership will be used solely for the purpose of processing your application and dealing with you as a member of Channel Sailing Club. The data will not be shared with any third party for marketing or commercial purposes without first obtaining your explicit consent.



CHANNEL SAILING CLUB LIMITED



MEMBERSHIP APPLICATION / RENEWAL FORM FOR THE PERIOD TO 30th SEPTEMBER 2010

Instructions for completing this form are on the first page of the application pack. The Membership Fee is £25.00 (£20.00 per person for Joint Subscription). Your cheque, made payable to Channel Sailing Club Limited, should accompany this form. Members joining after the 1st July 2009 will receive membership to 30th September 2010. (Current members need only complete items marked # unless there are changes to last years answers)

Part 1 – You

# Title	# Forename/s	# Known as	# Surname
# Address: Post Code		# Home phone: # Mobile phone: # Work phone(if you may be 'phoned at work) # Do you object to your telephone numbers being distributed to other members? Yes <input type="checkbox"/> No <input type="checkbox"/>	
# E-mail:			
# COMMUNICATIONS In order to reduce cost and expedite delivery we will communicate with members by email and/or the club's website. Please indicate if you require communications by post. Yes <input type="checkbox"/>			
# Your age group:	17 or less <input type="checkbox"/>	18-24 <input type="checkbox"/>	25-30 <input type="checkbox"/>
	31-40 <input type="checkbox"/>	41-50 <input type="checkbox"/>	51-60 <input type="checkbox"/>
	Over 60 <input type="checkbox"/>		
Occupation (Optional):			

Part 2 - Your sailing experience

Are you taking part in, or have you successfully completed an RYA shorebased navigation course? Yes <input type="checkbox"/> No <input type="checkbox"/>	
RYA Shorebased Course Completion Certificates held:	RYA Practical Course Completion Certificates held:
Basic Navigation and Safety Course <input type="checkbox"/>	Start Yacht <input type="checkbox"/>
Day Skipper <input type="checkbox"/>	Competent Crew <input type="checkbox"/>
Coastal Skipper/ Yachtmaster Offshore <input type="checkbox"/>	Day Skipper <input type="checkbox"/>
Yachtmaster Ocean <input type="checkbox"/>	Coastal Skipper <input type="checkbox"/>
VHF or SRC Radio Certificate <input type="checkbox"/>	RYA/MCA Certificate of Competence held:
First Aid Certificate <input type="checkbox"/>	Coastal Skipper <input type="checkbox"/>
Diesel Engine <input type="checkbox"/>	Yachtmaster Offshore <input type="checkbox"/>
Sea Survival <input type="checkbox"/>	Yachtmaster Ocean <input type="checkbox"/>
CEVNI <input type="checkbox"/>	ICC (coastal <input type="checkbox"/> , inland <input type="checkbox"/> , Power <24m <input type="checkbox"/> , Sail <24m <input type="checkbox"/>)
Describe your general sailing experience, years and type (dinghies, offshore, skipper, watchleader, crew etc). Please limit your description to 15 words.	
Total miles <input type="text"/>	Total days <input type="text"/> Night hours <input type="text"/>

Part 3 - General

Do you smoke? Yes <input type="checkbox"/> No <input type="checkbox"/> Do you object to sailing on a boat with smokers? Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not <input type="checkbox"/>	
New Members Only	Are you known to any CSC members? If so, please give their names.
	How did you hear about Channel Sailing Club?

Part 4 - Declaration

I wish to renew* / apply* for Full* / Associate* Membership of the Channel Sailing Club. I agree to all the terms and conditions of membership, as contained in the Articles of Association, the Club Rule Book and in the notes attached to this form .

# Signed:	For club use only
# Dated:	
# Counter-signed** Parent*/Guardian*	Cheque <input type="checkbox"/> Cash <input type="checkbox"/> Card <input type="checkbox"/> Membership List <input type="checkbox"/>
# Dated:	Full <input type="checkbox"/> Associate <input type="checkbox"/> Membership <input type="checkbox"/>

*Delete as appropriate. **If you are under 18 years old, this form must be counter-signed by your Parent or Guardian and annotated accordingly



CHANNEL SAILING CLUB LIMITED



BOAT INFORMATION FORM

If you own a boat with sleeping accommodation, please also complete this Boat Information Form.

Owners of boats currently registered with Channel Sailing Club need complete only the sections for Boat Name, Owner Details, and any places where there are changes from previous declarations.

Please include this completed form with your Membership Application Form

# Boat Name						Type of Boat	
Make						L.O.A.	
						<input type="text"/> m	<input type="text"/> ft
Class/Model						Draft	
						<input type="text"/> m	<input type="text"/> ft
Sail <input type="checkbox"/>							
Motor <input type="checkbox"/>							
Motorsail <input type="checkbox"/>							
Usual mooring & berth no.							
Colour of:	Sails					Sail Number	
	Hull, above waterline						
	Dodgers & lettering						
	Sail cover & sprayhood						
Engine Details	Inboard	<input type="checkbox"/>	Cruising speed and endurance under power			No. of berths	
	Outboard	<input type="checkbox"/>					
	Horsepower	<input type="text"/>	<input type="text"/> Knots	<input type="text"/> Hours			
VHF	Call Sign	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	All Channels?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Dual Watch?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Channel 37 (a.k.a. M1 or P1)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Please tick if you have these:	GPS (fixed)	<input type="checkbox"/>	MMSI No.		Have you submitted a CG66 within the past three years? Yes <input type="checkbox"/> No <input type="checkbox"/>		
	Radar	<input type="checkbox"/>					
	AIS	<input type="checkbox"/>					
	Dinghy	<input type="checkbox"/>					
	Liferaft	<input type="checkbox"/>					
# Owner Details:				Please note:			
Name:				Your boat details will be given to Event Organisers and other CSC skippers, to assist in organising events in the best interest of crew and boat safety.			
Address:							