



# Membership 2016-17 TEMP.FORM

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

**Little Ship Club (Queensland Squadron)**

ABN 31 009 823 590

Club address: 1 Yabby Street, Dunwich Qld 4183

Postal address: **PO Box 10, Dunwich Qld 4183**

Phone 07 3409 9022

Email [membership@littleshipclub.com.au](mailto:membership@littleshipclub.com.au)

Note: even if you are renewing an existing membership, please complete all fields below to ensure we have your current details. If you are completing this form in hard copy, to scan/email or post, please print clearly.

This application is a  **NEW**  **RENEWAL** Membership     LSC Member number (Renewals only)

### MEMBER and VESSEL details

Title  Mr  Mrs  Ms  Miss  Other (please specify) \_\_\_\_\_

First name \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone (M) \_\_\_\_\_ (H) \_\_\_\_\_ (W) \_\_\_\_\_

Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Email \_\_\_\_\_

Associate Member name (if applicable) \_\_\_\_\_

Other club memberships? (please list) \_\_\_\_\_

Emergency contact name \_\_\_\_\_ Phone \_\_\_\_\_

Vessel name \_\_\_\_\_ Length (LOA) metres \_\_\_\_\_

Vessel type (tick)  Light power craft  Motor cruiser/yacht  Sail  Monohull  Catamaran  Trimaran

Vessel insured by \_\_\_\_\_ Policy number \_\_\_\_\_

### NOMINATION statements

**PROPOSER\* name** \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\*I have been a Member of LSC for more than 12 months. The applicant is personally well-known to me and I recommend acceptance of this application for membership.

**SECONDER\* name** \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\*I have been a Member of LSC for more than 12 months. The applicant is personally well-known to me and I recommend acceptance of this application for membership.

### MEMBERSHIP and OPTIONS prices

 Full Member Renewal (Annual) \$215.00  Full Member New (including Joining Fee) \$290.00 Senior Member Renewal (50% discount)<sup>1</sup> \$107.50 Associate Member (Annual)<sup>3</sup> \$30.00  Social Member (Annual) \$30.00Add if required  Security Token deposit<sup>4</sup> \$30.00 (access pontoons, laundry, showers, and after-hours entry) LSC Burgee (vessels <13m LOA)  \$45.00 (vessels >13m LOA)  \$65.00 **TOTAL AMOUNT \$** 

### PAYMENT methods

 We accept cash, personal cheque<sup>5</sup>, bank cheque<sup>5</sup>, money order<sup>5</sup>, EFT<sup>6</sup> or credit card<sup>7</sup> payments. In person @ LSC (this completed form **must** accompany your payment at the Club) By EFT<sup>6</sup> to BSB 484-799 Account 044932641 Little Ship Club Date EFT payment made \_\_\_\_ / \_\_\_\_ / \_\_\_\_ By credit card<sup>7</sup>  Visa  Mastercard I hereby authorise the total amount (above) to be charged to my nominated credit card.

Name on card \_\_\_\_\_

Card number                      Expiry   CCV # 

Signature (if completing by hand) \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

#### IMPORTANT – please note:

- You need to have been a member of the Club for 15 years or more and be aged 65 or over.
- Any pro-rata amount for FULL Memberships will be advised at the discretion of the LSC Board.
- Associates must be attached to a Full or Senior Membership.
- Members' Security Tokens are for Full, Senior and Associate Members' use only.
- Cheques accepted subject to normal bank clearance processes; please make payable to "Little Ship Club Qld Squadron".
- In the transfer reference field, state [NEW surname] for new applications, or [member ##### surname] if renewal.
- Visa or Mastercard only, please, or EFTPOS at the bar.

### SUBMIT application

 This completed form **must** be returned, either:

- in person @ LSC, 1 Yabby Street, Dunwich
- by post to LSC, PO Box 10, Dunwich Qld 4183
- by scan/email to [membership@littleshipclub.com.au](mailto:membership@littleshipclub.com.au)
- online\* click the **green** 'submit now' button (Note: 'Save As' the PDF\* to retain a file copy) (\*Available only on the interactive PDF form)

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LSC Office use only	
Date paid	____ / ____ / ____
Updated info	____ / ____ / ____
Card issued	____ / ____ / ____
Mailchimp checked	_____
Security Token number	_____
Processed by	_____
Date completed	____ / ____ / ____

CLEAR FORM

SUBMIT FORM