



THE BRIXHAM YACHT CLUB

OVERGANG BRIXHAM

TQ5 8AR

Application for Membership

(BLOCK CAPITALS PLEASE)

Name Mr/Mrs/Miss/Ms

Address _____

Telephone _____

E-Mail _____

Occupation _____

Boat details (where applicable)

Name of boat _____

Type Dinghy / Yacht / Motor Sailer / Motor Cruiser (Delete as appropriate)

Class _____

Sail Number _____ Hull colour _____

Signature of applicant

Date

Proposed by

Seconded by

The Entry Fee of £25.00 MUST accompany this application.

Data Protection Act: I understand that my details will be kept on computer and paper records and that, if my application for membership is accepted, my details will be used for internal and membership purposes of the Club and that one of the methods used by the Club for disseminating notices and news will be by email.

Proposers Recommendation:

Seconders Recommendation:

FOR OFFICE USE

Submitted to Committee _____

Approved _____ Posted _____

Sub. Paid _____ Received _____

Entered _____ Register _____

Notified _____