

Iniscealtra Sailing Club Mountshannon, Co. Clare

MEMBERSHIP APPLICATION FORM

PLEASE USE BLOCK CAPITALS

1.	PERSONAL DETAILS						
	NAME						
	HOME ADDRESS						
	Note: Members DOB required. Free membership to: Any member aged 75+ and a member for 20 years or more.						
	GRADE OF MEMBERSHIP REQUIRED (Family, Crewing, Associate)						
	Please provide the following information if applying for Family membership						
	Partner / Spouse's Name Children – NAME (S) / AGE (S) if under 18						
							2.
The primary aim of ISC is to engage in sailing activity and to promote sailing as a sport. The committee works to achieve this aim through a number of sub committees. Please advise as to how you can contribute to this;							
CRUISING □ RACING □ CREWING □ COMMITTEES □							
Have you a Profession, Trade or Experience that could assist with running the club, if so please give details:							
Do you hold a Marine qualifications such as Sailing instructor, Safety boat driving, if so please give details:							
Please detail your previous sailing experience and previous club memberships if any, also advise if you hold or held officer roles in other clubs and include detail of same.							
3.	BOAT DETAILS						
	Are you a boat owner? \square NO \square Will you require a club mooring? YES \square NO \square						
	BOAT NAME	BOAT LENGTH					
	BOAT MAKE	BOAT DRAFT					
	INSURANCE: PLEASE ADVISE INSURANCE COMPANY that covers your vessel (not broker) and RENEWAL DATE						
	RENEWAL DATE	COMPANY that covers your vessel (not broker) and					

MEMBERSHIP PROPOSAL

whilst a member of ISC \square

The proposer and seconder must provide, a summary of the applicant's suitability for membership and what benefits they can bring to ISC

Proposers Summary						
ROPOSERS	NAME*		SIGNATURE* _			
Seconders Su	mmary					
	<u></u>					
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SECONDERS	NAIVIE		SIGNATURI	=		
. MOORING						
			age the mooring grid.			
	-	-	ed to incoming member g application form ne		pleted	
		-	e indicate below whe	-		
	•	•	Summer Time: _	•		
d. D	o you own or have	you the use of a p	rivate mooring in Mou	ıntshannon?	YES □ NO □	
	i. If Yes, plea	ase advise as to wh	en it was last service	d		
			mooring please advise			
∆nnlicant'	Signature:			Date:		
Aprilount .	, Signature.			Date.		
□ By ticking th	s hox vou are dec	laring that you will	retain annronriate 3rd	narty incurenc	e to a limit of €3,000,000	
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- Application form to be completed in full and returned to club secretary at iniscealtrasailingclub@gmail.com
- Data on this form is used to manage ISC club affairs and meets General Data Protection Regulation (GDPR) and Data Protection Acts 1988-2018.
- Iniscealtra Sailing Club is a Category 1 Affiliated Club with Irish Sailing. This means that by becoming
 a member of Iniscealtra Sailing Club you are also automatically a member of Irish Sailing. As such your
 details will be shared with Irish Sailing.