

## **Application Form**

Name and Address:	Type of Membership requested (please select):
	Full
	Family Crew
	Midshipman
	Cadet
	Country (conditions apply)
	Senior (conditions apply)
	Associate of:
	Date of birth:
Email:	Phone Number:
	I AM / AM NOT happy to share my phone number with
	other members of the club (delete as applicable)
Next of Kin / Parent or Guardian:	Next of Kin / Parent or Guardian
Name and Address:	Phone number:
	Relationship:
Reasonable adjustments required for disability or other condition:	
Boat details (if applicable):	Mooring required (please select):
Name or Number	Outer Trot
Model / Class	Deep Swinging
Length (in feet)	Low Water
Draught (in feet)	Store and launch (dinghies only)
Co-owner (if applicable)	
In applying for membership and signing this	form. I will abide by all rules, bylaws and
policies of Thurrock Yacht Club.	
• Signed:	Date:
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