



MEMBERSHIP APPLICATION

SAILABILITY NSW INC. AND ITS TORONTO BRANCH

I hereby apply to become a member of Sailability NSW Inc and its Toronto Branch. I agree to be bound by the rules of Sailability NSW Inc and its Toronto Branch for the time being in force and agree to abide by all decisions by a Committee member with regard to activities at a Sailability event.

PLEASE NOTE – Those who have not attended Sailability Toronto previously, please make contact with our Membership Secretary before sending in forms or paying fees. We will need to confirm we have availability on our roster for any new Client Sailors. Existing/Past client sailors our Membership Secretary will be in touch to confirm your attendance for Season 2023/2024.

Family Name:	Given Name:
Address:	
Home Phone:	Mobile Phone:
Email:	Date of Birth:

My Next of Kin:	Relationship to me:	
Address:		
Home Ph:	Work Ph:	Mobile Ph:

Client Sailors – sailing sessions are held on Thursday and Saturday. Typically a session is for 1 Hour from 10.00am and 11.00am. Times will be confirmed via communication from either our Thursday or Saturday Co-ordinator.

I will be attending with:

a) a group or school:	Group or School Name:	
b) my own carer:	Carer Name:	Mobile Ph:
c) no carer (i.e. on my own)		

I understand that providing the additional information requested below is optional but will assist Sailability NSW and its Toronto Branch with organisation of events and future development planning:

I have a disability:	Yes / No	Type of disability:
I need assistance:	Yes / No	Type of assistance: (ie, sling in and out of boat)
I use a wheelchair:	Yes / No	

I would like to attend on: Thursdays Saturdays (preferred time – 10.00am or 11.00am)

Fees: Client Sailor: \$40

Note that this fee includes \$5 for membership of Sailability NSW Inc.

Total Fee Due: (for period 1 July 2023 to 30th June 2024) - \$

I agree to have my details included in internally published reference documents and those required by Sailability NSW (e.g. address, phone no., skills, etc.)

Any photos in which I appear at Sailability activities may be published internally by Sailability or used in their promotional material

Signature:	Date:
(Print) (Signature)	
Indicate whether: Client Sailor <input type="checkbox"/> ; Parent or Guardian <input type="checkbox"/> ; Carer <input type="checkbox"/>	

Client sailor, please return your signed Membership and Indemnity form to the Membership Secretary at sailabilitytorontosecretary@gmail.com or hand in the printed forms on a sailing day.

Indicate your payment method;

- a) cash or cheque (to 'Sailability Toronto') to the Shore Co-ordinator during a sailing day, or
- b) Direct deposit (include payer's name) to: BSB: 650300 Account No.: 501563805
Account Name: Sailability Toronto

<i>Office Use Only – Membership Secretary, shore co-ordinator and/or treasurer</i>	
<input type="checkbox"/> Membership form signed; <input type="checkbox"/> Indemnity signed;	
Payment if submitted with these forms: Cash <input type="checkbox"/> or Cheque <input type="checkbox"/> \$	Receipt No.
The Membership Secretary can be contacted at sailabilitytorontosecretary@gmail.com	