MEMBERSHIP APPLICATION (1)

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Martha Cove Yacht Squadron Inc.



M.C.Y.S

Applicant Details (Download & fill out a separate form for each person)

| Membership Catego | ory | (Choose from Membership Schedule overleaf) |
|--|--|--|
| Surname | Mr/Mrs/Miss/Ms | Date of Birth |
| Given Names | | Preferred Name |
| Residential Address | | |
| | | Postcode |
| Email Address | | |
| Occupation | Company | |
| | Web address of your Company | |
| Personal Telephone | Mobile | Home |
| Name of Next of Kin | Mobile | Home |
| What would be your ma | ain activities: (tick all that apply) Race Management Sail Cruising Education/Training Crewing | Power Boat Cruising Other (specify) |
| Name of your boat (if a | applicable) | Sail Power None |
| Are you, or have you be Which Club(s)? | een, a member of any other yacht Clubs? | Yes No No |
| Existing Australian Sa | ailing AS Number (if any) : | |
| Do you have any exper | tise or opportunities from which the Club may ben | efit and which you are willing to share? |
| correct in every particu | bership of the Martha Cove Yacht Squadron and lar. If accepted, I agree to be governed by the Clupproved for membership by the Martha Cove Yac | ub's Constitution and By-Laws. |
| Signature of Applic | ant | Date |

Please complete the Proposer and Seconder declarations on the following page.

Affiliate applicants who have senior membership (or equivalent) of another Australian Sailing affiliated club do not need a Proposer and Seconder on providing proof of membership of their other club.

MEMBERSHIP APPLICATION (2)

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Membership Categories & Fees - 2024 / 2025

Membership year is 1st July to 30th June

M.C. Y.S

| Category | Criteria | | Annual Fee |
|--------------|--|--------------------------|------------|
| Senior | Anyone over 18 years of age | (Full voting rights) | \$ 297 |
| Family | 1 Senior + 1 Affiliate + unlimited children under 18 | (One full voting rights) | \$ 535 |
| Affiliate | Social, Partner, Crew or Dual members of other clubs | (No voting rights) | \$ 238 |
| Intermediate | Students and apprentices under 30 years of age | (Full voting rights) | \$ 250 |
| Out of Port | Anyone residing outside the Port Phillip and Westernport Bay areas | | \$ 120 |
| Junior | Under the age of 18 years | | \$ 108 |

Please see www.mcys.com.au for more information on membership categories and member benefits. Current pension card holders qualify for 10% discount. Submit a scan of your card with your application.

| DECLARATION BY PROPOSER | | | | |
|--|--------------------------------------|-------|--|--|
| I know the applicant: | | | | |
| personally and have great pleasure in acting as Proposer on their application for membership of MCYS | | | | |
| Proposer: | I have known the proposed member for | Years | | |
| Signature: | | | | |
| Member Number: | Membership Type: | | | |
| Note: The Proposer and Seconder must both be Senior Members. | | | | |

| DECLARATION BY SECONDER | | | | |
|--|--------------------------------------|-------|--|--|
| I know the applicant: | | | | |
| personally and have great pleasure in acting as Seconder on their application for membership of MCYS | | | | |
| Seconder: | I have known the proposed member for | Years | | |
| Signature: | | | | |
| Member Number: | Membership Type: | | | |
| Note: The Proposer and Seconder must both be Senior Members. | | | | |

No proposer or seconder? Please include a letter outlining your boating background and interest in MCYS Questions? Email membership@mcys.com.au or telephone MCYS on 0491 627 864

To apply for membership scan and email this application to membership@mcys.com.au or post to: MCYS Membership, 2 Pickings Road, Safety Beach, 3936