Membership Application form Lowry Bay Yacht Club (Inc.)



Your details	1						
Name							
Address							
Email	Bank A/c no.						
Phone	hm		wk		mob		
Membership ca	ategor	y (tick one) 🖌					
Senior	(full r	(full membership rights)					
Family	(part	(partner or child under 20 of a senior member, has limited membership rights)					
Country	•	(reside North of Waikanae River, or east of the Rimutaka ranges, or the South Island or overseas, has limited membership rights and excludes racing)					
Details for boat	t regis	ter (if applicable)					
Name of boat:	Owner/s na			name:	ake:		
Boat type (✓)	Yacht	Sail #	Trailer	Yacht Sail #	La	unch Power Boat	
C:							

Sign your acceptance

I agree to abide by the rules and bylaws of LBYC. I authorise LBYC and Yachting NZ, as a condition of my membership, to use my personal information in connection with my membership (including to offer member benefits and in the Almanac) and to communicate with me electronically. I am aware of my right to access and correct such information.

Club volunteers are important to our success. If a suitable opportunity arose would you be willing to help the club as a volunteer. \checkmark Tick for Yes

Your Signature		da			date	
Proposed by	name		signature		date	
Seconded by	name		signature		date	

Payment

Use the table below to calculate your payment to the end of the membership year (June). Payment may be made by cash, EFTPOS or online. (Lowry Bay Yacht Club ANZ 060545 0013952 00 Reference Your Name)

Membership	Month you are applying in					
Subscription	Jul - Sept	Oct - Dec	Jan - Mar	Apr - Jun		
Senior	\$169.34	\$127	\$85	\$42		
Family & Country	\$106.37	\$80	\$53	\$27		

For a club burgee add \$20.

Our contact details

Web: lbyc.org.nz Email: info@lbyc.org.nz Phone: 568-3715 Visit: 100 Port Road, Seaview

OFFICE USE ONLY

Exec Approval	Membership #	Card issued	Database	Boat Register	Welcome Letter	Email List	Burgee issued