



## Membership Application Form

Single  Family Membership

Name: .....

Address: .....

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Email: .....

Phone: .....

Boat Type: ..... Hull Colour: .....

Boat Name: ..... Membership only  Berth number

Insurance cert enclosed/attached Y/N

Proof of address enclosed/ attached Y/N

Copy of ID enclosed/ attached Y/N

I agree to be bound by the rules, regulations, terms, and conditions of Ramor Watersports Club.

I certify that I am insured for third party risks and enclose a copy of my certificate.

I accept full responsibility for the management and safety of the boat noted above and I also accept that neither the Organising Authority, The Race Committee, nor any of their members, employees or representatives bears any responsibility for any loss damage or injury to persons, property or boats that may occur in connection with my membership of Ramor Watersports Club. Should my boat not be maintained and need to be removed due to dilapidation or sinkage there is a €1000 club charge for removal and disposal.

Signed ..... Date: