



# TWEED HEADS AND COOLANGATTA ROWING CLUB LIMITED

## APPLICATION FOR MEMBERSHIP 2011

I have read and understood the Tweed Heads and Coolangatta Rowing Club Membership Handbook and wish to apply for membership for the 2011 season, valid to 31 Dec. 2011.

**PERSONAL DETAILS** - Name: Dr / Mr / Mrs / Miss / Ms \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: M / F Occupation: \_\_\_\_\_

Phone: (H): \_\_\_\_\_ (Mob): \_\_\_\_\_ (W): \_\_\_\_\_

**Email:** \_\_\_\_\_

**EMERGENCY CONTACT** - Name & Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

**TYPE OF MEMBERSHIP** - Please tick. Fee must be paid in full with application.

<input type="checkbox"/>	<b>Active Senior</b>	\$330
<input type="checkbox"/>	<b>Active Junior</b> (under 19)	\$160
<input type="checkbox"/>	<b>Recreational Member</b>	\$220
<input type="checkbox"/>	<b>Social Member</b>	\$30

<input type="checkbox"/>	<b>Learn to Row Senior</b>	\$120
<input type="checkbox"/>	<b>Learn to Row Junior</b>	\$60
<input type="checkbox"/>	<b>Competitive Life Member</b>	\$330

I have a current and valid: (please tick) First Aid Certificate [  ] Boat license [  ] Level 1 Coaching Certificate [  ]

**HEALTH & FITNESS DETAILS** - Can you swim at least 50 metres? Yes / No

Have you had a heart attack, stroke or suffer from high blood pressure? \_\_\_\_\_

Do you suffer from any injury or illness that may affect you when you exercise, in particular, the following?

please tick . . . Diabetes [  ] Asthma [  ] Epilepsy [  ] Back or Neck Problems [  ]

Other, and any medication taken, please state: \_\_\_\_\_

If you suffer from any of the above please obtain medical clearance from a doctor before continuing with this application.

### DECLARATION -

I, the above-named, do fully understand that I cannot be elected as a member of the Club until the board of Directors meeting following fourteen days from the date hereon. If duly elected to the Club, I hereby agree to abide by the memorandum and articles of association of the company - Tweed Heads and Coolangatta Rowing Club and agree to the rules and responsibilities of members (as outlined in the Membership Handbook) and the rules of Rowing Queensland.

I am aware that rowing as a sport, the training and associated activities including the use of gymnasium equipment, can be a dangerous undertaking. I am also aware that in undertaking the sport and any training I do so at my own risk. I understand that it is a condition of my admission to memberships of the Tweed Heads and Coolangatta Rowing Club and the use of the facilities at the Rowing Shed, that the Club, its office bearers, members, instructors, servants or agents are absolved from all liability (however arising) from injury or damage however caused (whether fatal or otherwise) arising out of membership of the Club or participating in training at the club rooms or use of the facilities and equipment or in any way whatsoever due to any negligent act, breach of duty, default and/or omission on the part of the Tweed Heads and Coolangatta Rowing Club, its office bearers, members, instructors, servants or agents.

I am also aware that any person rowing or training with the Club or participating in any activity carried out by the Club are only allowed to do so on the distinct understanding that they do so at their own risk.

I acknowledge that of my own free will and desire I have contracted with the Tweed Heads and Coolangatta Rowing Club for membership, instruction and training in rowing and use of the facilities provided by the Club and that I have read and understood the warning set out above before signing this document.

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

If under 18,

Parent/Guardian (sign and print name): \_\_\_\_\_ Date: \_\_\_\_\_

NOMINATED BY: \_\_\_\_\_

Date of Approval: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Receipt No: \_\_\_\_\_ Date sent to RQ: \_\_\_\_\_