

The Trailer Sailer Association of SA Inc.

MEMBERSHIP APPLICATION



PERSONAL DETAILS

Full Name Spouse / Partner Name.....

Children (under 18).....

Address

Tel (Home) (Bus).....

E-mail Mobile.....

YACHT DETAILS

Name of Yacht Design

Sail No. Year Made

Boat Registration No. Do you require a **TS** prefix boat registration number? (YES / NO)

Name of any other sailing club(s) at which you are a member.....

How did you learn about the TSASA?

Did a TSASA member introduce you? Who?

TSASA EVENT DECLARATION

- I understand the possibility of hazards to persons and property being presented, when participating in sailing and associated activities.
- I agree, as a condition of entry or participation in any TSASA event, to abide by the rules of the Association, and comply with any formal instruction or direction by the Association.
- I declare that my vessel is adequately maintained and insured, including ten million dollars (\$10,000,000) of public liability.
- I acknowledge that the safety of my vessel, trailer and crew is my sole responsibility and that I am solely responsible for deciding whether or not to enter, participate, or continue to participate in any TSASA event.
- I agree to comply with all relevant statutory requirements as a mandatory condition of entry to TSASA events.
- I agree to be bound by the above when participating in a TSASA event whether or not I have signed any entry or other application form in respect of that specific event.

Signature Dated

There is no joining fee.

Annual membership subscription of \$45.00 required with application.

Mail the completed application form to the Secretary TSASA as below.

Payment by Cheque	Electronic Transfer
Secretary TSASA Phil Lawrence P.O. BOX 270, SUMMERTOWN, S.A. 5141	TSASA Banking Details: BSB 805050 Account 61250294
Membership Enquiries (Tel 08-8390 1087)	All electronic payments must include YOUR NAME so that transactions can be matched to application forms.