

The Trailer Sailer Association of SA Inc.

Hon. Secretary Peter Stace
21 Thames Street, Clarence Park SA 5034
Tel 08 8271 7859



MEMBERSHIP APPLICATION

Full name Spouse / Partner name

Children (under 18)

Address

Tel (Home) (Bus)

E-mail Mobile

DETAILS OF YACHT

Name of Yacht Design

Sail No Year Made

I require a **TS** prefix for my boat registration number (YES / NO) If no, what is your reg #?

Sailing club membership (if any)

How did you learn about the TSASA?

Did a 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 understand that the Association, in its capacity as a recreational service provider will, as far as is reasonably practicable, ensure that participants and observers of Association activities are not exposed to levels of risk exceeding those normally accepted as being associated with sailing.
- 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 event.

Signature

Dated

Association use only	
Original to Secretary	
Copies to	
	Treasurer
	Promotions Committee
	Social Committee
	Editor

***I enclose \$40.00 annual membership subscription
(please return to Secretary with this application form)***