

Please tick ✓ or provide #

| | |
|--------------------------------------|---|
| Application for new member | |
| Cancel existing membership | # |
| Change details {for existing member} | # |
| Rejoin (old membership#, If known) | # |

Personal Details

| | |
|------------|--|
| First Name | |
| Surname | |
| Initials | |
| Home ph | |
| Mobile ph | |
| Work ph | |

| | |
|--------------|--|
| Address | |
| | |
| | |
| Town/City | |
| Postcode | |
| E-mail | |
| Trailer Reg. | |
| Car Reg. | |

Boat Details

| | |
|----------------------------------|---|
| Boat Name | |
| Size | |
| Boat type (please circle one) | eg. trailer boat, dinghy, yacht, commercial, launch, runabout, cabin cruiser, catamaran, launch etc |
| Boat make | |
| Boat model | |
| Material | |
| Call sign | |
| Hull colour | |
| Top colour | |
| Motor make | |
| Motor HP | |
| Propulsion | |
| Fuel Type | |
| Aux HP | |

| Equipment on boat | Quantity |
|-------------------|----------|
| Anchor Rope | |
| Bucket/Bailer | |
| Compass | |
| Depth Sounder | |
| EPIRB | |
| Fire Extinguisher | |
| Flares Hand | |
| Flares Parachute | |
| GPS | |
| Life Jacket | |
| Life Raft | |
| Radar | |
| Smoke Signals | |
| Torch/Spotlight | |
| VHF Radio | |

Emergency contact details if boat overdue (next of kin or another person we can contact)

| | | | |
|-----------|--|-----------|--|
| Name | | Address | |
| Home ph | | | |
| Mobile ph | | | |
| Work ph | | Town/City | |
| | | | |

Coastguard joining fees to payable at time of joining and invoiced annually each year

Please Tick ✓

| | | |
|--------------------------|----------------------|----------|
| <input type="checkbox"/> | Ordinary Membership | \$ 85.00 |
| <input type="checkbox"/> | Associate Membership | \$ 37.50 |
| <input type="checkbox"/> | Youth membership | \$ 25.00 |

For Office use only

 Member pack

 Computer file

I agree to abide by the rules of the Association as per the Constitution, a copy of which is held by the Secretary.

Signed
Date

Please fully complete this form and forward with your payment to: Coastguard Whakatane