



SEACRAFT SYNDICATE BOAT OWNERS CLUB INC. (SSBOC)

ABN 86 453 239 491 Inc.A0000989V

PO Box 237 Pakenham Vic 3810

info.ss boc@gmail.com

*Our mission is to gather together Owners and Families of Seacraft, Syndicate Rivercraft or like timber vessels to use enjoy and preserve these craft in an organized safe group environment as defined by rules*

## NEW MEMBER / CHANGE OF DETAILS APPLICATION FORM

*Membership Year – July 1<sup>st</sup> to June 30<sup>th</sup> (or part thereof)*

Please complete and return form to the email or postal address above.

**An invoice will be emailed to you with payment details.**

Adult 1 \_\_\_\_\_ Adult 2 \_\_\_\_\_

Child 1 \_\_\_\_\_ D.O.B \_\_\_\_\_ Child 2 \_\_\_\_\_ D.O.B \_\_\_\_\_

Child 3 \_\_\_\_\_ D.O.B \_\_\_\_\_ Child 4 \_\_\_\_\_ D.O.B \_\_\_\_\_

Address \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_ Email \_\_\_\_\_

Phone – home \_\_\_\_\_ Mobile \_\_\_\_\_

For Boat Owners Only: Boat Name \_\_\_\_\_

Make / Model \_\_\_\_\_ Year Built \_\_\_\_\_ Boat Rego \_\_\_\_\_

\*If you have more than 1 boat please provide all details.

\$95.00 FAMILY MEMBERSHIP BOAT OWNER

2 Adults and their children under 21 as of July 1st or 2 Adult siblings over 21 excluding their partners.

\$70.00 SINGLE MEMBERSHIP BOAT OWNER

Single boat owner or adult child of a boat owner that has a Seacraft, Syndicate or Rivercraft

\$95.00 FAMILY ASSOCIATE MEMBER

2 Adults and their children under 21 as of 01/07/2017 or 2 Adult siblings over 21 excluding their partners.

Associate is a non Seacraft, Syndicate or Rivercraft boat owner – No voting rights

\$70.00 SINGLE ASSOCIATE MEMBERSHIP

Single person who is a non Seacraft, Syndicate or Rivercraft boat owner – No voting rights

**By signing this application I agree to abide by the SSBOC constitution**

**and code of conduct at all times**

Please note that to run your boat at SSBOC Regattas, your boat must carry appropriate insurance. Currently the policy providing specific cover for SSBOC Regattas is offered by Nautilus Marine Insurance – contact Mark Crockford - [markc@nminsurace.com.au](mailto:markc@nminsurace.com.au) / 0433 663 542. Boat owners please ensure you update us with a copy of your insurance policy at each renewal.

Signed Applicant \_\_\_\_\_ Date \_\_\_\_\_

Office use only: Insurance papers received / sited ( ) By: \_\_\_\_\_ Date: \_\_\_\_\_