

MONTROSE SAILING CLUB SUBSCRIPTION 2015-16 SEASON

NAMES (INCL. AGE IF UNDER 18)

	AGE	Please tick if 18+ and willing to undertake a PVG check*
		<input type="checkbox"/>
		<input type="checkbox"/>

*For the peace of mind of all members, the Club respectfully requests that adult members join the Scottish Protection of Vulnerable Groups scheme. However, this is only a requirement for Committee members and instructors/tutors. There is no charge to the Club for the check, which is met by RYAS.

ADDRESS

Postcode:

TELEPHONE	
MOBILE	
E-MAIL	

EMERGENCY CONTACT:

If you don't own a boat, just complete "A" Sub-total A

Individual (18 years or over)	£85	
Family (including children under 18 years)	£110	
Student / youth (14-18, or 18-25 and in F/T education)	£30	
Junior (under 14 years)	£30	
Non-sailing member	£10	

Dinghy Park

If your boat was stored away from club over winter, just pay for future summer storage Sub Total B

	2014-15	To pay	2014-15	To pay	2015	To Pay	Subtotal B
	Winter Outdoors		Winter Indoors		Summer		
Dinghy	£20		£35		£20		
Canoe	£20		£20		£20		
Sailboard	£20		£20		£20		
Road trailer	£10		na		£16		
						SUBTOTAL (B)	£
						SUBTOTAL (A)	£
						TOTAL (A+B)	£

All fees are payable by 1st April 2015 by cheque, or by electronic BACS transfer to Montrose Sailing Club, sort code 83-25-16, account number 00200688. In you wish to pay your fees in three equal Direct Debit instalments (April, May, June), please contact the Treasurer.

Please complete, sign and return all of this form to the Treasurer: **Rory McLeod, 14 Panmure Place, Montrose. DD10 8ER.** Receipt will be sent by email unless requested by surface mail.

I declare that, as a boat owner, I hold valid and current boat insurance, which covers me for Third Party claims while sailing / racing, and that I will continue to do so while sailing at Montrose Sailing Club.

Signed Date

Self-disclosure form
for applicants for posts involving contact with children and/or vulnerable adults.
RYA Revised Feb. 2014

Montrose Sailing Club is committed to safeguarding children and vulnerable adults from physical, sexual and emotional harm. As part of our safeguarding policy, we require applicants for posts involving contact with children and/or protected adults to complete this self-disclosure form. Having a criminal record will not necessarily bar you from working with us. This will depend on the nature of the position and the circumstances and background of your offences.

(Cross-out one answer and circle the other one to ensure your response is clearly understood)

1	<p>Have 'you' ever been convicted or cautioned of any criminal offences.</p> <p><i>Note: You are advised that under the provisions of the Rehabilitation of Offenders Act 1974 as amended by the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2003 you should declare all convictions including 'spent' convictions, cautions, warnings and reprimands.</i></p>	YES	NO
	<i>If yes, please supply details:</i>		
2	<p>Are you a person known to any Children and Families Social Care Department as being an actual or potential risk to children?</p>	YES	NO
	<i>If yes, please supply details:</i>		
3	<p>Have you ever had any disciplinary sanction relating to child abuse?</p>	YES	NO
	<i>If yes, please supply details:</i>		

Declaration. I declare that to the best of my knowledge, the information given above is correct and understand that any misleading statement or deliberate omission may be sufficient grounds for cancelling or denying membership.

I understand that I may be asked to apply to be a member of the Voluntary Scotland Disclosure Service Protection of Vulnerable Groups (PVG) scheme and consent to do so if required. I understand that the information contained in this form and in the Disclosure may be passed on, where strictly necessary, to regulatory bodies and/or third parties who have an interest in child protection and/or protected adults issues

Name(s)

Signed

Date

Note: If applicant is aged under 18, this form should be counter-signed by a parent or guardian.

CONFIDENTIAL

Contact and Medical Details (ADULT) Season 2015

An appropriate form should be completed for each person named on the membership form and given in a labelled (name) sealed envelope to Club Secretary at beginning of season – the envelope will be securely held at the Club House and will only be opened in the case of medical need.

Name
Phone
Address
D of B (if under 18):
Mobile:

Emergency Contact A

Name: Relationship:
Phone: Mobile:

Emergency Contact B

Name: Relationship:
Phone: Mobile:

MEDICAL DETAILS

GP / GP Practice:
Phone:

Medical Conditions (e.g. Asthma):

Medications:

Allergies:

Any other relevant information? (e.g. Pacemaker, joint replacements?):

PHOTOGRAPHY

In the normal course of club activities it is likely that photographs or videos will be taken of boats and sailors and used to improve coaching or publicise the club (e.g. through the club website and Facebook page, posters, or local newspapers). To reduce the risk of images being used inappropriately, we will only make use of images of people who are suitably dressed. Montrose SC recognises that photography of children / vulnerable adults is a sensitive issue and hence anonymous images will be used, unless prior permission has been given for names to be used (e.g. Trophy night awards); for Protected Groups this will ordinarily be forenames only.

If you consent to your name being used in club publicity please tick this box:



If you **DO NOT** consent to your images being used in club publicity please tick this box:



Signed:

Date

CONFIDENTIAL

Contact and Medical Details (CHILD) Season 2015

An appropriate form should be completed for each person named on the membership form and given in a labelled (name) sealed envelope to Club Secretary at beginning of season – the envelope will be securely held at the Club House and only be opened in the case of medical need

Name: D of B (if under 18):
Phone: Mobile:
Address:

Emergency Contact A

Name: Relationship:
Phone: Mobile:

Emergency Contact B

Name: Relationship:
Phone: Mobile:

MEDICAL DETAILS

GP / GP Practice:
Phone:

Medical Conditions (e.g. Asthma):

Medications:

Allergies:

Any other relevant information? (e.g. Pacemaker, joint replacements?):

PHOTOGRAPHY

In the normal course of club activities it is likely that photographs or videos will be taken of boats and sailors and used to improve coaching or publicise the club (e.g. through the club website and Facebook page, posters, or local newspapers). To reduce the risk of such images being used inappropriately, we will only make use of images of people who are suitably dressed. Montrose SC recognises that photography of children / vulnerable adults is a sensitive issue and hence anonymous images will be used, unless prior permission has been given for names to be used (e.g. Trophy night awards); for Protected Groups this will ordinarily be forenames only.

If you consent to your child's name being used in club publicity please tick this box:

If you **DO NOT** consent to your child's image being used in club publicity please tick this box:

Signed
(Parent/guardian)

Date