



**Shoalhaven Rowing Club Inc**  
**Paringa Park Nowra**  
 PO Box 888 Nowra 2541  
 www.shoalhavenrowing.com



**APPLICATION FOR MEMBERSHIP RENEWAL & NEW MEMBERSHIP**  
**1 October 2018 to 30 September 2019**

**ABOUT YOU**

Family name:		Given name:	
Date of Birth:		If under 18, name of parent/guardian:	
Address:			
Mobile number:		Alternative phone:	
Emergency contact person:		Emergency contact's number:	
Email address/s:			Tick if you wish notifications to be sent to <b>all</b> email addresses <input type="checkbox"/>
Have you been issued with a shed key? YES / NO		Key number issued to you: (if applicable)	
Have you ever had a NSW Rowing membership? YES / NO		NSW Rowing membership number:	
Are you a member of Shoalhaven Ex-Servicemen's Club? YES / NO		Shoalhaven Ex-Servicemen's Club membership number:	
Do you intend to compete this season?	YES	NO	NOT SURE YET

**MEMBERSHIP TYPE** *circle below membership type applying for*

Full <b>senior</b> member	\$370	Full <b>junior</b> member (under 18 or still at high school)	\$204
<b>Family</b> membership * (1 parent/1 child; additional sibling + \$153) <small>* complete separate form for each person</small>	\$523	<b>Junior family</b> membership * (2 family siblings under 18 or still at high school) <small>* complete separate form for each person</small>	\$357
Supporting / Non Rowing member	\$40	Associate/Temporary member (30 day limit)	\$64

**PAYMENT & DECLARATION** *cash payments not accepted*

Direct deposit     Enclosed Cheque (made payable to Shoalhaven Rowing Club Inc)

I paid \$.....on .....(date) to:  
 Shoalhaven Rowing Club    BSB: 062585    A/C: 10243182

I agree to the MEMBERSHIP TERMS & CONDITIONS as listed on the SRC membership website

Signed: (Parent/guardian's signature if under 18)	Date:
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## MEMBERSHIP TERMS & CONDITIONS

Please read all statements below and tick the box on the Membership Form to demonstrate you have read, understood and agree to these terms and conditions.

I understand that I must **abide by the Rules and By-laws** of the club and I must obey the lawful and reasonable directions of the Captain, Vice-Captain and Committee members, as provided by the Rules.

To the best of my knowledge, I am **not suffering from any condition** that would prevent and/or render me unfit to participate in rowing activities. I confirm that I will advise a member of the Shoalhaven Rowing Club Committee immediately in writing if I suspect that these circumstances have changed.

I confirm I can **swim 100 metres** in rowing clothes.

I agree to **pay subscriptions and any debts** I may incur to the Club's Treasurer in a timely way.

I understand that, if I **choose to compete**, I must be a registered financial member of NSW Rowing Association.

I understand that Shoalhaven Rowing Club **does not provide personal accident insurance cover** for me while I participate in the activity of rowing. This insurance cover is provided by Rowing NSW for its members, as detailed on their website.

I understand that Shoalhaven Rowing Club shall retain and use **personal information about me** in accordance with the Club's privacy policy\*\*, available on the Club's web site, and which I have read and understood.

I agree that **photos** which may include images of me may be used by Shoalhaven Rowing Club in **promotions**, including in newspapers and on social media.

If I wish to participate in coaching / assisting in our junior/ school rowing programs I must complete and undertake a **Working with Children Check** (WWCC) Information of which can be found at [www.kidsguardin.nsw.gov.au](http://www.kidsguardin.nsw.gov.au) and forward results to the club president.

Payments from renewing members must be processed **before 31 October** each year. After that date, **renewing members** will not be permitted to row until their payment has been processed. New members will not be permitted to row until their application is approved and payment processed.

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