WOODY POINT YACHT CLUB

MEMBERSHIP APPLICATION 24/25 (1 May to 30 April)



woodypyc.treasurer@gmail.com /PO BOX 158, CHURCH POINT, NSW 2105

Name:	Email address	s:	
Street Address:	City	State	P/Code
Postal Address:	City	State	P/Code
Phone - Work:	Phone – Mob	ile:	
Boat Name:	Design:	Sail Number:	
	Y (please tick) ies include all the WPYC function C events you are required to o		
 Sailing \$300.00 (With Both Putt Putt/ Gent's Launch Social \$125.00 Junior Membership \$50.00 		00 (Without Burgee) b Functions)
	existing membership of the Woody Point Yacht Cl in for the time being in force. Please note that the		
Signature:		Date:	
INSURANCE DECLARATI	ON (must be completed to obtain	n membership and sail v	with the WPYC)
Insurance Company:			
Policy Number:			
Renewal Date:			
Registered Boat Owner:			
I submit that the details provided above are tru Club unless I have a current insurance policy fo	e and correct. I undertake NOT to enter into a rac r the boat.	ce managed by or affiliated with th	ne Woody Point Yacht
Signature:		Date:	
Payment: EFT is preferred, A	A Cheque can be sent to the abo	ve address.	
Account Name: Woody Point 'BSB: 082 294	Yacht Club		

Account No.: 50738-5261

Reference: Your Name & Boat Name