

First Name

ANA ROWING CLUB NEW SCHOOL TERM MEMBERSHIP APPLICATION FORM

Surname

Please email completed form to: secretary@anarowingclub.org.au or place in the correspondence box in the boat shed

REQUIRED INFORMATION (please use capitals and circle relevant items)

Gender	М	F	Oth	er	Da	ate of Birth					
Address			·								
Address	Suburb							Postcode			
Telephone	(h)			(v	v)		(m)				
Email	·										
School											
Emergency Contac	ct Details										
Name											
Contact Number						Relationship					
Medical Conditions (please list)											
Qualifications (pl	ease circl	e all rel	levant ite	ms.	Any	vitem marked with	h * cop	y of cer	tificate to be provided)		
First Aid*			(Skip	per	s Ticket*		Bronze Medallion*			
Willing to tow boat trailer											
Other Skills (please list)											
Have you rowed previously?			If yes, please provide brief details of experience								
Yes No											
Are you transferring from another club?			If yes, which club (to facilitate transfer)								
Yes	No										

Last Updated: October 2024



Circle the school term being applied for: Term 1 | 2 | 3 | 4 | Summer Holidays Year: 20____

Ac	knowledgement of Terms and Conditions				
I,	(print name)				
reg of	hereby apply for membership of ANA Rowing Club Inc ("the Club"). In so doing I agree to be bound by the rules, regulations and codes of conduct including data protection policies of the Club in place from time to time. (A copy of the rules and regulations of the Club, together with codes of conduct, are available for inspection at the clubrooms and are also available on the Club website; anarowingclub.org.au).				
Ple	ease tick items to indicate you have read and acknowledged the following conditions:				
	I confirm that I can swim a distance of at least 100 metres whilst fully clothed.				
	I am not subject to any medical condition and am not taking any medication which would impact my ability to undertake water based or physical activity such as rowing or of which the Club should be aware.				
	I agree to follow any health, hygiene and safety protocols as directed by state or local authorities, ANA Rowing Club or its committee.				
	I hereby authorise the Committee to release my telephone number and email address to executive club members to assist in the communication of club activities and for my name and address to be passed to Rowing WA and Rowing Australia for registration purposes.				
	I consent that the ANA Rowing Club has the full rights to use any images resulting from the photography/video filming of any regatta, training session or club event for fundraising, publicity or other purposes to help achieve the club's aims.				
	I accept that as an outdoor sport, rowing has inherent risks including, but not necessarily limited to those associated with weather, water and boat handling. In participating in the sport of rowing at ANA Rowing Club, I accept personal responsibility for evaluating and accepting these risks.				
	I understand the term fees are due before the commencement of training.				
	I have paid a \$210 term membership fee.				

\$210 payment was made by (please circle)									
Direct Transfer	Cheque	Cash							
BSB: 736-000 A/C No: 070182		made payable to	ANA Mei		ber				
A/C Name: ANA Rowing Clu Ref: (please use your name)		"ANA Rowing Club	Inc"	Date received					
Parent / Legal Guardian's Signature					Date				
Proposed by (must be ANA member)			Seconded by (must be ANA member)						
Proposer's Signature			Seconder's Signature						
Date			Date						

Last Updated: October 2024