Penguin Cruising Club Ltd: Application Form Shetland: 27 May - 10 June 2017

A SEPARATE FORM IS REQUIRED FOR EACH APPLICANT

Please send completed form and payment to: Ian Rose. 91 Avon Road, Devizes, Wilts, SN10 1PT Home: 01380 721262 Mob: 07779 387006 Email: roseih@gmail.com and inform him by phone or email

APPLICANT			NEXT	OF KII	V (not on this Cruise!)
Name:		Name:			
Address:		Relations	ship:		Address as applicant: []
		Address:			
Date of Birth Postco	de:				
Dhara Na'ar Hara					Postcode:
Work		Phone N	o's·	Home	1 6516546.
Mobile		11011011	.	Work	
Email:				Mobile	
I apply for a place on the Shetland cruise	- 27 May to 3 June 201	7 inclusive	e[]		
I apply for a place on the Shetland cruise					
					experience overleaf
Any medical conditions which might be imp	ortant in an emergency a	re noted o	verleaf []	I am a vegetarian []
I am open to being Skipper/Mate this year] I should like to pro	gress to be	ing a Sk	ipper or N	flate on future cruises []
Either: I attach a deposit by cheque for £	(minimum £1	00 <u>per wee</u>	k booke	d) payable	e to lan Rose .
					ail me for my bank details).
I understand that the minimum deposit is of the total fee, including deposit, of £480 for					
I have read and understand the Club rule:					
"3.2 Any person being or becoming a Member of the C risks, agrees to conform to the rules of the Club and ag	rees to behave in a seamanlike	manner and ir	n accordanc	ce with (a) th	nese rules; (b) the rules laid down by the Committee or
Cruise Commodore for the cruise; (c) any other directio Member's skipper on any cruise or Club activity; (d) pro					
I wish to become a Member of the Compar	y, and agree to pay £1.0	0 in the ev	ent of the	e Compar	ny being wound up. * (delete if strongly opposed)
I agree to receive Club communications by					
I confirm that the applicant can swim 25m. I understand that all arrangements are with	I understand that there is The Penguin Cruising C	a STRICT lub Ltd.	LY NO S	SMOKING	S policy on board any yacht.
Signed:		(A	pplicant,	or parent	t/guardian if under 18)
Applicants under 16 at time of Cruise:		All applic	ants sai	iling with	Penguin for the first time:
I am under 16 years old. I would like to jo for a cruise and I will do my best to help us		I understa	and that a	acceptano	ce of my application makes me an Ordinary gree to be bound by the Rules.
Signed	(Under-16)	Signed:			
Applicants aged 16-17 at time of Cruise:		I should li			or parent/guardian if under 18) Ill Member at the next AGM [].
I confirm my agreement to all on this form t					d endorse the experience stated:
parent/guardian has signed up to on my be		Taupport	ші арріі	cauon an	a chaoise the expendice stateu.
Signed	(16-17)	Name of F	Full Mem	ber	Signature

Please make sure that you read and understand the following:

The Club operates as a non-profit making company owned by its members, according to rules agreed by the membership. One of these is that anyone taking part in a Club Cruise must be a member of the Club. Anyone who has sailed with the Club becomes a Full Member on payment of the annual subscription. If you have not sailed with the Club before, you become an Ordinary Member on acceptance of your application and Cruise Fee: you will then be considered for full membership at the AGM following your first Cruise.

Full membership of the Club currently costs £7.50 per annum. If you are a member of the Club, you do not have to become a member of the Company: but the Committee hopes that you will do so by agreeing to pay £1 should the Company ever be wound up. Each member's liability is thus limited to £1. Please delete the statement on the application form if you do not wish to be a Company member.

Insurance: The Club now requires that those who join the cruise take out adequate travel insurance for themselves against the personal typical risks of cancellation, travels delays, supplier failure, injury, loss or damage to their property etc. The insurance policy must include cover of these risks in coastal waters. Be warned that many lowcost (and particularly bank 'free') holiday insurance policies are inadequate and need reading carefully. The policy should start from the date that you make any payment of the cruise fee as refunds are at the discretion of the committee and will normally be approved only if a suitable replacement can be found and all the other berths are filled. The Club reserves the right to refuse to allow you to take part in a Club cruise if you do not have such insurance.

SAILING EXPERIENCE	
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MEDICAL INFORMATION	

Please initial box above if completed when you return the signed form to the Cruise Organiser