MEMBERSHIP APPLICATION FORM

To the committee of the Gliding Club of Western Australia Inc.

I, ……

(*Full name in BLOCK LETTERS*)

Address: …… Telephone: ……

…… Postcode: ……

Email: ……

Hereby apply to join the Gliding Club of WA Inc in the following category: (*Please mark one box only*)

Flying Member ☐ Family Flying Member ☐ Tow Pilot Member ☐

Associate Member ☐ Short-Term Flying Member ☐

Age: …….. Occupation: ……

Previous gliding experience (*if any*) ……

……

Previous power flying experience (*if any*) ……..

……

Why did you choose this club? Friends ☐ Internet ☐ social media ☐

Other (*please elaborate*) ……

In consideration of your acceptance of me as a Member, I hereby strictly agree to the following: -

1. That the Club shall in no way be responsible for any personal or material accident or loss suffered by me whilst travelling to or from the Club's premises or grounds or during the period when I am undergoing instruction or gliding or any form of flying or am on or in the vicinity of the Club's premises whether caused by default, neglect or lack of skill of the Club's officials or servants or members or pupils or invitees or due to any defect in the Club's equipment or error in construction.

2. That I shall make myself conversant with and strictly obey and conform to the rules, by-laws and regulations of the Club and moreover conform to and/or carry out the directions and instructions issued to me by the Club's instructors and/or Officials and I hold myself liable for any and all damage to the aircraft, stores and/or equipment of the Club, or on lease or hire to it, which results from my own act or negligence or not strictly adhering to the provisions of this paragraph.

3. That the Club may at any time and without necessarily assigning any reason, refuse to instruct me or permit me to glide or fly in any of the Club's aircraft and that on such refusal the Club shall not be bound to refund to me any entrance fees, subscriptions or other fees paid by me.

4. That I will promptly pay to the Club all fees from time to time charged by the Club for instruction in flying and/or gliding or for the use of the Club's aircraft and/or facilities and any annual subscriptions and other fees deemed applicable by the Club.

Dated this…… day of …… year ……..

Applicants signature: ……..

Nominated by Member: …….. Signature ……..

(Please complete a Consent form if applicant is under 18 years of age)

CONSENT FORM

(*Complete only if required*)

The consent of a Parent or legal Guardian must be given if the applicant is under 18 years of age.

To the committee of the Gliding Club of Western Australia Inc.

I (*full name*)…….
of (*address*) ……..
……
am the Parent/Legal Guardian of (*Applicants name in full*) ……
…….. who is under 18 years of age and I hereby consent to and confirm the Membership Application Form attached.

I further hold myself legally responsible for the conduct of the Applicant and for settling promptly any and all debts incurred by the said Applicant to the Club until such time as the said Applicant either terminates his/her membership with the Club or attains the age of 18 years whichever occurs sooner.

Dated this ……. day of …….. year ……..

Signature: ……..

Witnessed by: ……

Name and address of Witness: ……

……..

PLEASE COMPLETE THE GLIDING AUSTRALIA Declaration of Physical Fitness FORM AND FOLLOW THE PROCEDURES TO UPLOAD A COPY TO YOUR GA CREDENTIALS PAGE.