Downs Sailing Club
Membership Renewal 2026

Name:	
Address:	
Landline Telephone:	
Mobile:	
Email: 1st adult applicant	
Email: 2nd adult applicant	

Included in family Membership: **partners living at the same address and children under 18 years**

Name	DOB	Age	Relationship to you

Boat Class	**Sail Number**

If needed, extra space on page 4 for more family members and boats. **NOTE: Will you please ensure every boat is insured. Club Rule 14.1: Members may not bring their boats on the club property or take part in club events unless they are indemnified against third party risk in the sum of £2 million.**

MEDICAL INFORMATION:

Please detail in space below any changes in your health which could affect your time on the water. Please note the requirement to inform the safety boat, if necessary, of any concerns on the day of sailing.

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2026 Membership

If you joined after September 2025 only the 'boat package' will be payable for 2026.

BREAKDOWN OF FEES FOR 1) MEMBERSHIP AND 2) BOAT PACKAGES

Membership	Before January 2026 prices	After January 2026 prices
FAMILY	145	155
INDIVIDUAL	95	107
SECOND CLUB INDIVIDUAL	56	62
SECOND CLUB FAMILY	81	91
SOCIAL	56	60
STUDENT	30	35
CADET	30	35

BOAT PACKAGES	ADULT FEE 2025	CADET/ STUDENT FEE 2026	Family Fee 2026
BOAT PLOT PACKAGE Single Hull	62	43	N/A
Multi Hull	110	86	N/A
RECREATIONAL SAILING EQUIPMENT PACKAGE	77	49	Total for adults and cadets minus 25%
CLUB RACING EQUIPMENT PACKAGE	62	44	Total for adults and cadets minus 25%
Kayak Plot	30	30	

MEMBERSHIP FEE	£
BOAT PACKAGES FEE	£
TOTAL	£

Membership fees can be paid in four monthly instalments.
Final payment by April 30th 2026

Please tick payment method

Paying by bank transfer Downs Sailing Club – Sort Code: 40 – 19 – 10 – Account No: 61376322 – Quoting your full name.	
Paying by instalments Downs Sailing Club – Sort Code: 40 – 19 – 10 – Account No: 61376322 – Quoting your full name.	
Cheque. Send to: Membership Secretary, Downs Sailing Club, The Clubhouse, The Strand, Walmer, Deal CT14 7DY	

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By signing below I/we agree to*:(please tick boxes)*

- *abide by the rules of the Downs Sailing Club* ***YES*** ☐
- *my/our personal information being stored in the Downs SC database.****YES*** ☐
- *I/we understand that the details provided on this form will only be used for official purposes.* ***YES*** ☐
- *take personal responsibility to inform the safety boat of any medical issues that could affect you whilst afloat* ☐
- *From time to time club members may be filmed with photographic and/or video images. I/we agree to images being included in any team photos or publicity materials.* ***YES*** ☐ ☐ ***NO***
- ***Use of your Child's image:*** *organisers may arrange for videos or images to be taken at events and published on the event or organisers' website or on social media channels to promote the event or organiser. I/we agree to the use of the image of your child/children*
  YES ***NO***
- *If you later wish to withdraw your agreement please contact the Membership Secretary. Please be aware if you withdraw your agreement, it is not possible to remove the image from printed material in circulation or intended for the next edition is released.*

Signed:	**Dated:**

This form can be returned by email to: rosaleenlord@gmail.com

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NAME: _____

TRAINING /INTERESTS QUESTIONNAIRE- Please tick

DUTIES YOU FEEL CONFIDENT TO DO	CANTEEN	BRIDGE	SAFETY BOAT

DUTIES WHERE YOU REQUIRE TRAINING	CANTEEN	BRIDGE	SAFETY BOAT

EXTRA SPACE FOR FAMILY MEMBERS' DETAILS IF REQUIRED

Name	DOB	Age	Relationship to you

EXTRA SPACE FOR BOAT DETAILS IF REQUIRED

Boat Class	**Sail Number**