

**DINGHY PARK APPLICATION 2020
PLEASE COMPLETE THE WHOLE FORM**

MEMBERSHIP No:

Name:

Address:.....

.....

Tel No: Email

I wish to retain the Dinghy Park Space allocated to me for the boat described below:-

THE VESSEL MUST BE A SAILING DINGHY

Dinghy Name :

Class.....Length:.....

Colour: Deck.....Hull.....Cover.....

I enclose payment in the sum of £120.00 Adult /£80.00 Junior Sailing Dinghy Park
(Please circle requirements)
Total £ _____

Do you intend to use the Dinghy Park all season Yes / No

Which months do you **NOT** intend to use the Dinghy Park

April /May / June / July / August /September / October

Please delete months in which you will **NOT** be using the space.

Please make cheques payable to HRSC and send to: Helford River Sailing Club, Helford, Helston, TR12 6LB or if you wish to pay by BACS our bank details are: Helford River Sailing Club, Sort Code: 30-94-07 Account No: 00090120. Please put your name and 'Dinghy Park' as reference.

Signed.....Date.....

Boat insurance cover Y/N Name of insurance company