



## **APPLICATION FORM**

To the committee of Gliding Club of Western Australia (Inc.)			
I,	(Full name in BL		
Address			. Telephone:
		e	
Email			
Apply to join the Gliding Club of WA as a m	nember in the following catego	ry	
Flying Member $\square$	Short Term Flying Member $\square$		Associate Member
Jr, Sr, Family Member $\ \square$	Tick one box only		Associate Family Member $\square$
Previous Gliding experience (if any)  Previous power flying experience (if a	ny)	□ Internet	☐ Yellow Page
Club's premises or grounds or during	onsible for any personal or ma the period when I am undergo	terial accident or damage ing instruction or gliding o	suffered by me whilst travelling to or from the or flying or am on or in the vicinity of the servants or members or pupils or invitees 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 all damage to the aircraft, stores and or equipment of the Club or on lease or on hire to it, which results from my own act or negligence on non strictly adhering to this provisions of the paragraph.
- (3) That the Club may at any time and without necessarily assigning any reason, refuse to instruct me or permit me to glider or fly in the Club's gliders and that on such refusal the Club shall not be bound to refund to me any entrances fees, subscriptions or other fees paid by me.
- (4) That I will pay to the Club promptly any fees from the time to time charged by the Club for instruction in flying and/or gliding or for the use of the Club's gliders, and any annual subscriptions and other fees deemed applicable by the Club.

Dated this day of Year Signature:

Witnessed by: