

# Membership Form



QUEER ROWING ASSOCIATION OF VICTORIA INC.  
 ABN - 24 061 880 595  
 Mail - PO Box 18284, Collins Street East, Melbourne, Victoria 8003  
 Email - queerrowing@melbourneargonauts.com  
 Boatshed – Powerhouse, Lakeside Drive, Albert Park Lake

Personal Details					
Name				Gender	
Address				Postcode	
Mobile		Home Phone			
Email		Date of Birth			
Detail any relevant medical conditions and / or permanent medications:					
Emergency Contact Name				Phone	
If you are a member of another club, which one?					
Clearance Date		Transfer Required?	Yes / No		
<i>You have two options for paying your membership fee ie direct debit or credit card payment.</i>					
Annual Membership – Yearly Payment					
Competitor Open	\$380				
Competitor Concession	\$308				
Social Open	\$290				
Social Concession	\$236				
Coxswains and Coaches	\$74				
Fargonaut	\$20				
If concession, what type? (provide evidence)					
<b>Payment Method Options – Internet Banking or Credit Card</b>					
Internet Banking	Transfer funds to BSB 633 000, Account 113051650. Use the following description: (1) MEM- (2) First 3 letters of your surname (3) First 3 letters of your first name. For example, "Mark Smith" would look like MEM-SMIMAR.				
Credit Card (not AMEX)		Card Number		Expiry Date	

I hereby apply for membership of the Queer Rowing Association of Victoria (QRAV) and undertake, if admitted, to abide by its Constitution, Rules and By-laws. I can swim at least 100 m in full rowing uniform. I agree to be held liable for my subscription and all other monies due by me during my membership. I agree to indemnify QRAV, its Officers, servants, agents and sponsors ("QRAV and Agents") against any damages, loss or injury of any kind incurred or suffered by me and arising out of or in conjunction with my participation in any QRAV activities, whether or not such loss or injury shall have been caused or contributed to by an act, omission or negligence of QRAV and Agents. I agree also to indemnify the QRAV and Agents against any claim or demand whatsoever made by any person or persons arising out of or in conjunction or connection with my participation in QRAV activities. Personal information collected on this form will be available to Committee members and where applicable, Rowing Victoria Inc. I agree not to use information about any member collected as part of my membership for any purpose other than QRAV administration.

I have read the form and accept all terms and conditions and can't wait to be an Argonaut again or for the very first time.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Mail hardcopy to address shown or email edited softcopy to [queerrowing@melbourneargonauts.com](mailto:queerrowing@melbourneargonauts.com).