



Date Received _____
Serial Number _____

ABERDEEN BOAT CLUB LIMITED

20 Shum Wan Road, Aberdeen, Hong Kong

APPLICATION FOR MEMBERSHIP

I wish to apply to join the Aberdeen Boat Club as a:

☐

DEBENTURE MEMBER

☐

NOMINEE MEMBER

Personal Details

Family name *(Dr/Mr/Mrs/Ms/Miss/Prof) _____ Given names: _____ Gender *M /F _____

HKID No. / Passport No (*please select*) - Identity No . _____ Nationality _____

Date of Birth _____ Place of Birth _____

Home E-Mail _____ Home No _____ Mobile No _____

Residential Address _____

Company Name _____

Company Title _____ Profession or Occupation _____ Industry _____

Company Telephone No _____

Company E-Mail _____

Company Address _____

Member of any other clubs in HK? _____

Like to receive Sailing Information / E-mail _____ Business () _____ Personal () _____ No () _____

Like to receive E-letters _____ Business () _____ Personal () _____ No () _____

Like to receive E-Statement _____ Yes () _____

Like to receive Horizons Format _____ E-Horizons () _____ Hard Copy Horizons (Business) / (Home) _____
Please select

If you have any of the following qualifications please tick the appropriate box and complete the details below

Sailing Level Certificates	Yes () Level	Other
Keel Boat License	Yes () Level	
Masters Certificate	Yes () Level	Expiry Date
Engineers Certificate	Yes () Level	Expiry Date

Boat Information – Boat 1

Boat Operating No (Cruiser)	Boat Sail No.	Boat Name	Boat Type (Junk/ Sailing Yacht/
Boat Size	Insurance *(Third Party/Complete)	Insurance Renewal Date	
Boat Operating License Renewal Date			

Boat Information – Boat 2

Boat Operating No (Cruiser)	Boat Sail No.	Boat Name	Boat Type (June/ Sailing Yacht/
Boat Size	Insurance*(Third Party/complete)	Insurance Renewal Date	
Boat Operating License Renewal Date			

Other Information.

Interested	Dinghy ()	Billiards ()	Squash ()	Gym ()	Diving ()
	Sailing ()	Windsurfing ()	Swimming ()	Other	

Spouse/Partner Details

A Marriage Certificate is required as part of the application process

Family name *(Dr/Mr/Mrs/Ms/Miss/Prof)	Given names:	Gender *M /F
HKID No. / Passport No (please select) - Identity No		Nationality
Date of Birth	Place of Birth	
Office Telephone No	Mobile No	
Business Email Address	Personal Email Address	
Employer's Name		
Business Correspondence Address		
Profession or Occupation	Industry	

If your Spouse has any of the following qualifications, please tick the appropriate box and complete the details below

Sailing Level Certificates	Yes () Level	Other
Keel Boat License	Yes () Level	
Masters Certificate	Yes () Level	Expiry Date
Engineers Certificate	Yes () Level	Expiry Date

Children Details aged - Child 1

Name of child under 21 (M/F)*	Date of Birth	Signing Rights 12-20 Yes () No ()
Nationality	Place of Birth	School
Mobile no	Email Address	
Sailing Level Certificates	Yes () Level	Other

Children Details aged - Child 2

(If more than 2 children please attach a separate sheet with the details as below)

Name of child under 21 (M/F)*	Date of Birth	Signing Rights 12-20 Yes () No ()
Nationality	Place of Birth	School
Mobile no	Email Address	
Sailing Level Certificates	Yes () Level	Other

Please provide your rationale for your desire to become a member of the Club

I _____ wish to become an Aberdeen Boat Club member and in the event of my being elected, I agree to be bound by the rules of the Club.

Signature of applicant	Date
Signature of spouse	Date

(After completing the form, please send it to mbs@abclubhk.com)

NB: The information provided by the applicant (and that of any family member) to Aberdeen Boat Club will be collected and used to process your membership application. Please be aware that we may occasionally use your email address or mobile number for direct marketing communication from Aberdeen Boat Club. All information collected in this form will be treated in strictest confidence and handled confidentially. Personal data will never be disclosed to a third party without your consent.

Please enclose a copy of your ID cards with this filled application.

You may receive an invitation later to meet members of the General Committee.

Office Use Only

I certify that I have met the above applicant at the New Members' Evening.
(Three General Committee members' signatures required).

1. Name	Account number	Signature
2. Name	Account number	Signature
3. Name	Account number	Signature

Office use only

☐ Signature verification	☐ Register	☐ ID attached
☐ Waiting List	☐ Acknowledgement	

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