GPBSLSC Phone Number: *0499 353 363*

GPBSLSC Email: *info@gbslsc.com.au*

Membership Application Form

Annual Fee (Please select)		***Family (including students up to and including 18 years)***	$100.00
		Senior (Over 16 years)	$50.00
		Junior (under 16 years) or Concession	$25.00

I/We wish to become member(s) of Golden Paradise Beach Surf Life Saving Club Inc. and agree to be bound by *all the rules of the club.*

All members 18 years and older are required to hold a *Working with Children Check (or evidence of application to be provided with one month of application). Please refer to the attached information page for details*

Primary Member Details [1, 2]

Family Name: _____ **Given Name:** _____

Address: _____

Suburb / City / Town: _____ **Postcode:** _____

Telephone: _____ **Date of Birth:** _____

Email: _____

Occupation: _____ **WWCC:** _____

Family Members Details [1,2] – please list all other members to be covered by membership

Family Member 2

Family Name: _____ **Given Name:** _____

Date of Birth: _____ **Occupation:** _____

Email: _____

WWCC: _____

Family Member 3

Family Name: _____ **Given Name:** _____

Date of Birth: _____ **Occupation:** _____

Email: _____

WWCC: _____

Family Member 4

1. *Medical conditions or allergies suffered by any Family member are to be listed over page and treatment plans to be handed in prior to first attendance.*
2. *Nippers are placed into Age Groups based on age at midnight 30th September, Nippers not participating in the correct age group are not eligible for awards and ribbons.*

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Family Name: _____ **Given Name:** _____

Date of Birth: _____ **Occupation:** _____

Email: _____

WWCC: _____

If more than four (4) family members please list on a separate page or include details in an email.

1. *Medical conditions or allergies suffered by any Family member are to be listed over page and treatment plans to be handed in prior to first attendance.*
2. *Nippers are placed into Age Groups based on age at midnight 30th September, Nippers not participating in the correct age group are not eligible for awards and ribbons.*

Medical Details

If you suffer or you have suffered from any disease or any physical or mental disability (e.g. epilepsy, diabetes or any permanent disability to a limb, eye or ear) likely to affect your efficiency as a club member, it may affect your safety and the safety of the public, please consult your medical practitioner and GPBSLSC prior to commencing any surf lifesaving activity.

Please provide a treatment plan to the GPBSLSC Secretary and Age Manager will be notified if a Nipper participant.

Name:		☐	Asthma	☐	Allergies	☐	Other:	
Name:		☐	Asthma	☐	Allergies	☐	Other:	
Name:		☐	Asthma	☐	Allergies	☐	Other:	
Name:		☐	Asthma	☐	Allergies	☐	Other:	

There are many ways in which you can become involved in club activities. Please indicate below which areas are of interest to you or you may be able to assist.

☐	Patrol	☐	Nippers' training	☐	Committee
☐	Fundraising	☐	Working bees	☐	Assist with social events
☐	Administration Assistance	☐	Other:		

How did you find out about Golden Paradise Beach Surf Life Saving Club?

Please ensure all details on the form have been completed. This information will enable GPBSLSC to complete your registration and is vital to ensure you are covered by insurance while on the premises and/or during training sessions.

I/We understand:

- This membership nomination will be lodged with and approved by the GPBSLSC Committee and a three (3) month probation period will apply.
- Copies of **Responsible Alcohol Policy, Club Constitution & Rules and Members Protection Policy** can be
- supplied by the Club Secretary, on request.
- Consent to the use of photographs that may be taken of me/us at GPBSLSC events/activities, for use in advertisements and club promotional material including social media.

As the parent or guardian of an applicant under the age of 16 years, I expressly agree:

To be responsible for the applicant's behavior and agree to accept the conditions set out in this membership application and declaration including the provision by me of a release and indemnity in the terms set out above.

As a requirement all members included on the *application who are* ***over 16*** **years** ***must sign.***

Signature (Primary member)	Date
Signature (Member 2 if 16 years and over)	Signature (Member 3 if 16 years and over)
Signature (Member 4 if 16 years and over)	

Payment Options

Please use EFT to Golden Paradise Beach Surf Lifesaving Club account using your Family name as payee reference. Payment can also be made online at https://www.gbslsc.com.au/payments.html#/
You must still return Membership form including the receipt.

Membership year runs from 1 July to 30 June

BSB **083004** Account number **747043199**

EFT Receipt Number _____

Office Use Only.	Date	Initials
Receipt No:		
Accepted at Committee Meeting		
President		
Treasurer		
Entered on Surfguard		
Entered on Database		
Secretary		
WWCC Number		

Working with Children Check (WWCC) Requirements and Regulations.

Golden Beach Surf Life Saving Club Inc (GPBSLSC) policy and Victorian State Government Regulations states that all members, who are over 18 years of age, must have a valid Working with Children Check (WWCC). As such, Golden Paradise Beach Surf Lifesaving Club requires all members, over the age of 18, to hold the check and have it registered to GPBSLSC. This requirement also applies to all teachers, police officers and anyone else who has another 'similar check' for their employment. Your membership cannot be confirmed until we have received notification from the Department of Justice that you have completed the check, that is it valid for the entire season and it is registered to GPBSLSC. The check is free for all volunteers.

WWCC application forms are available online at the link below, and from any post office. Please complete all sections, taking note of the following:

- When completing section **11**, please use the code **42** (Clubs and Associations), **28** (Coaching and Tuition) and **10** (Overnight Camps).
- When completing section **12**, please place a **X**—next to the declaration that I currently work or volunteer in child related work with the following organisation:

Primary Organisation:

Golden Paradise Beach Surf Life Saving Club Inc.
69 Beachcomber Rd Golden Beach Vic 3851
C/O Post Office, Golden Beach Vic 3851
Phone: 0499 353 363

To ensure your WWCC is received by GPBSLSC, please ensure you use the *POST OFFICE GOLDEN BEACH VIC 3851* address above.

Lodge your completed form at your local post office, together with a passport size photo and with your 100 points of ID.

Your WWCC is valid for 5 years and to be eligible for GPBSLSC membership you will need to ensure that it is valid for the entire season – until 31st July in the year following your application for membership. If your WWCC expires before that date, follow the WWCC renewal instructions on the link below, as it is simpler to renew your WWCC before it expires. We understand that many parents may already have a valid WWCC for work or volunteer activities with other organisations. If this is the case, please ensure that GPBSLSC is also listed as volunteer associations for your individual check. All procedures are detailed at www.workingwithchildren.vic.gov.au where your will also find answers to any other questions you may have on this Department of Justice webpage. In the unlikely event that you have further questions please feel free to contact info@gbslsc.com.au

It is essential that you attend to this requirement in plenty of time prior to the commencement of the season, as you and your children will be unable to take part in any GPBSLSC activities, including Nippers, without a valid WWCC registered to GPBSLSC.

SAFEGUARDING CHILDREN AND YOUNG PEOPLE IS EVERYONE'S BUSINESS

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