



# THE AUSTRALIAN MODEL POWER BOATING ASSOCIATION



## **AMPBA AFFILIATED CLUB REGISTRATION AND INSURANCE APPLICATION FORM**

Club Name \_\_\_\_\_

Club President \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ AMPBA Number \_\_\_\_\_

Club Secretary \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ AMPBA Number \_\_\_\_\_

Club Secretary Address \_\_\_\_\_ Suburb \_\_\_\_\_ Post Code \_\_\_\_\_

Club Secretary E-Mail Address \_\_\_\_\_

Number of Club Members in AMPBA \_\_\_\_\_

Club Incorporation Number \_\_\_\_\_ State of Incorporation \_\_\_\_\_

*(All Clubs affiliated to the AMPBA must be Incorporated. As well as many other important issues, Incorporation indemnifies the Clubs Committee and its Members in the case of accidents etc.)*

Name of Lake or Water to be Insured \_\_\_\_\_

*(Detailed Photos of the Water or Lake must be included with this application)*

Water Address \_\_\_\_\_ Suburb \_\_\_\_\_ Post Code \_\_\_\_\_

List Name of Property Owner (Government or Person)

Name \_\_\_\_\_

Address \_\_\_\_\_ Suburb \_\_\_\_\_ Post Code \_\_\_\_\_

I hereby certify that the above named Lake or Water meets the AMPBA requirements for an approved site including the following:

- A. The site is closed to public swimming while AMPBA boats are operating.
- B. The site is posted with "NO SWIMMING" signs.
- C. The site is closed to all publicly operated watercraft while AMPBA boats are being operated.

***I certify that I have read the AMPBA Rule Book, Constitution and Bylaws and state that our club will abide by them.***

Signature of Club President \_\_\_\_\_

Signature of Club Secretary \_\_\_\_\_

Club Registration Fee \$25.00 (Paid Annually) Make Cheque payable to A.M.P.B.A, Cheque Number \_\_\_\_\_

Copy of Insurance Policy Certificate will be sent to the Club Secretary.

Mail this form to the AMPBA Secretary at:

P.O. Box 4200

Croydon Hills LPO

Victoria. 3136

***CLUB IS NOT REGISTERED UNTIL APPROVED IN WRITING BY THE AMPBA COMMITTEE***