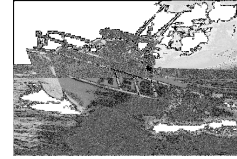




VOLUNTEER MARINE RESCUE JACOBS WELL

P.O. Box 279, Beenleigh Qld 4207
Council Reserve, Jacobs Well/Pimpama Rd. Jacobs Well
ABN 25 862 670 198



APPLICATION FOR ASSOCIATE MEMBERSHIP

VMR Jacobs Well Associate Membership covers you for break down assistance from all areas south of the Eric Early Light (in the vicinity of the northern tip of Lamb Island) to the North Arm of the Coomera River, and including the Logan and Albert Rivers and Jumpinpin Bar. Our Extended coverage includes areas North to Bribie Island and South down to Southport and Point Danger under the Terms and Conditions of our VMR Southern Zone Extended Service Agreement.

Offshore (ie offshore from North & South Stradbroke & Moreton Islands) assistance is available at the discretion of the Resource Controller and under the advisement of the Gold Coast Water Police. Free coverage consists of towing (breakdowns or fuel), soft groundings and jump starts. In the event of a tow being required, we will tow you back to your point of departure that day or the nearest safe harbour, which ever the Duty Skipper deems appropriate on the day. Harbour to Harbour tows for maintenance or repairs are not covered and are classed as a commercial job.

Search and Rescue, Qld Ambulance First Response Activations, Police Activations
and Medical Evacuations are our primary role.

Activations for people or vessels in genuine distress will not be charged, members or non members.

VMR Jacobs Well offer a radio listening watch 24/7 365 days a year.
The base has rostered on Volunteer Crews 7 Days a week.

Membership Types: Extended Service - Associate **\$70.00** Concessions: **\$60.00**

First name/s:	Last Name:	Date of Birth: / /
Street & #:	Suburb:	Post Code:
	Occupation:	Hm Ph:
Boat Name:		Wk Ph:
Length: mtrs	Make/Type:	Mb:
Boat Rego No:	Boat Colour:	Email:
Engine Make:	Horsepower:	
Vehicle Type:	Vehicle Rego:	Radios fitted (circle)
Mooring Location:	Trailer Rego:	27 mHz VHF HF None
Concession Card No:		

If I am accepted as an Associate Member of Volunteer Marine Rescue – Jacobs Well, I hereby agree to abide by the Constitution and Rules of this Association. All details collected are in accordance to the Privacy and Personal Information Act 1988 for use in processing your application and on occasions when you may require assistance from VMR Jacobs Well.

Applicants Signature:

Date:

OFFICE USE ONLY			
Nominated by:	Seconded by:		
Amount Paid: \$70 / \$60	Date:	Receipt No:	Taken by:
Membership No.:	Expiry Date:		

Credit Card No: _ _ _ _ _
Expiry Date: _ _ / _ _ Card Type: Visa Bankcard Master Card (circle)
Card Holders Name:
Please make Cheque payable to: Volunteer Marine Rescue Jacobs Well