

# Queenscliff SLSC 2018-19 Schedule of Fees

Office use only  
 Receipt Number:  
 Date:

Membership Type: (Birth dates as at 30 September 2018)	Tick Applicable	Fees
Life Member	<input type="checkbox"/>	Fees Waived
Membership (all Categories)	<input type="checkbox"/>	\$130
Member > 65 Years of age	<input type="checkbox"/>	\$60
Community Members	<input type="checkbox"/>	\$110
Second Family Member (All categories)	<input type="checkbox"/>	\$110
Family Membership (3 or more Family members living under the same roof)	<input type="checkbox"/>	\$300

N.B. Discount of \$50 for all members who completed over 50 patrol hours in 2017-18\*

N.B. Nipper members require at least one accompanying adult member per Family.

\* **Maximum one discount per family membership**

<b>SIGN UP Non Volunteering Fee (Single Member)</b>	<input type="checkbox"/>	\$90
<b>SIGN UP Non Volunteering Fee (Family)</b>	<input type="checkbox"/>	\$180

**Life Saving Training** (in addition to Membership fee)

SRC training	<input type="checkbox"/>	\$100
Bronze Medallion Training (< 19 years)	<input type="checkbox"/>	\$125
Bronze Medallion training (>19 years)	<input type="checkbox"/>	\$150

<b>Competition Fee</b> (U15, U17, U19, Opens, Masters, March Past)	<input type="checkbox"/>	\$50
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**Gym Membership Type**

<b>Standard Member</b> (General member, Associate or Nipper parent)	<input type="checkbox"/>	\$450 PA
<b>Patrol Member</b> (minimum of 25 hours last season),		
<b>Competitors, Opens or Masters, U17 and U19 Members</b>	<input type="checkbox"/>	\$0
Gym Tag	<input type="checkbox"/>	\$80
Shower and Toilet Tag	<input type="checkbox"/>	\$20

**Payment Details**

Membership Total: \$\_\_\_\_\_ inc discount

Additional Fees Total: \$\_\_\_\_\_  
 (Training, Gym Fees, Non Volunteer contribution and Swipe bands or Tags)

Donation: \$\_\_\_\_\_

**TOTAL PAYMENT AMOUNT:** \$\_\_\_\_\_

**PLEASE PRINT CLEARLY**

Cash  Cheque

Direct Deposit: Queenscliff SLSC BSB: 032096 Acc: 761440

Visa  Mastercard |\_|\_|\_|\_|-|\_|\_|\_|\_|-|\_|\_|\_|\_|-|\_|\_|\_|\_|

Expiry Date: |\_|\_| / |\_|\_| CVV: |\_|\_|\_|

Name on Card: \_\_\_\_\_ Contact Number: \_\_\_\_\_

***If paying in person at Club,  
 please bring card with you:  
 do not complete card number  
 details below.***