

PERSONAL INFORMATION

I-MBA Sailing Club – MEMBERSHIP FORM

Surname:		Name:	
Date of birth[DD/MM/YY]:	Nationality:		I-MBA Class:
E-mail:		Mobile Phone:	
Preferable way of communicating with you about sailing: E-mail Mobile phone			
City:	Street:	Number:	ZIP Code:
Profession/Company:			
Marital Status:			
SAILING BACKGROUND			
Do you have a sailing diploma? yes no			
If yes, specify sailing organization and year of diploma:			
No matter whether you have or haven't a sailing diploma, describe your sailing experience [races, cruises etc]:			
Do you have any sailing boat which could be used for the purposes of the I-MBA Sailing Club? yes no			
If yes, please specify a few details of the sailing boat [type/year/current condition]:			
I-MBA SAILING CLUB ACTIVITIES Identify your interests and you will be informed only about the activities you are interested in.			
Would you like to be highly involved in the organization / management of the Club? yes no			
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SAILING DIPLOMAS			
Are you interested in attending sailing courses to take a sailing diploma? yes no			
If yes, what kind of sailing diploma? Beginne	er advanced	racing skipper(pr	ofessional)
SAILING WEEKENDS Are you interested in participating in sailing weekends? yes no			
Are you interested in participating in sailing weekends? yes no If yes, you could participate in sailing weekend as: skipper crew member tourist			
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SAILING RACES			
Are you interested in participating in sailing races?* yes no			
Are you willing to devote time for the training of the sailing crew? yes no			
I would like to be member of the I-MBA Sailing Club and I authorize the verification of the information			
provided in this form. I also know that my personal information will ONLY be used for the purposes of			
the I-MBA Sailing Club.			
Signature:		Date:	
L Note: you can participate in sailing races, even if you do not have a sailing diploma!!			