



# AUSTRALIAN POWER BOAT ASSOCIATION NEW SOUTH WALES COUNCIL (NSW APBA) Inc.

Under the NSW Associations Incorporated Act 1984 and affiliated with the UI M  
Through the Australian Power Boat Association National Council

AUSTRALIAN POWER BOAT ASSOCIATION

ABN: 20 741 105 932

**PRESIDENT: GLENN BANKS**

**Mobile: 0431 207 029**

**E-mail: nswcouncilapba@hotmail.com**

**SECRETARY: GLENN BURNS**

**Mobile: 0408 019 739**

**Website: www.nswapba.com.au**

**ALL CORRESPONDENCE TO: PO Box 23, REGENTS PARK NSW 2143**

27 August 2014

Licence Paperwork can be handed in at the following venues:

- Saturday 13 September – From 2pm at the Oasis Centre, Windsor (Reinforced Cockpit Tests)
- Sunday 14 September – From 8am at Deepwater Motor Boat Club Race Day
- Friday 19 September – From 12 noon at Upper Hawkesbury Power Boat Club
- Saturday 20 September – From 7am to 9am at Upper Hawkesbury Power Boat Club

IF NOT PAYING IN PERSON, PLEASE SEND TO:

NSW LICENCE OFFICER

PO BOX 23

REGENTS PARK NSW 2143

## NSW LICENCE FEES FOR 2014-2015 *(Costs inclusive of GST)*

	DRIVER Only	BOAT OWNER Only	OWNER/DRIVER	Additional Boat
Unrestricted / Limited	\$280.00	\$500.00	\$780.00	\$250.00
Restricted / F4-S	\$280.00	\$300.00	\$580.00	\$150.00
Junior	\$50.00	\$70.00	\$120.00	\$35.00
Single Event	\$250.00	\$250.00	\$500.00	
Day and Novice	\$60.00	\$90.00	\$150.00	
Formula Future Day	\$10.00	\$10.00	\$20.00	

### DAY LICENCE

To encourage the entry of <b>FORMER</b> drivers back to the sport	Not valid for Championship, Major Day or, Speed/Time Trials
Are valid only for competition at individual events	Requires the Self-Assessing DAY MEDICAL Form to be completed
ONLY TWO (2) DAY LICENCES can be held in any one season	Can be upgraded to FULL or ½ YEAR Licences

### NOVICE LICENCE

To encourage the entry of <b>NEW</b> drivers to the sport	Requires the Self-Assessing NOVICE MEDICAL Form to be completed
Are valid for competition at individual events	Are not to be issued to any driver that has previously held any type of APBA Competition Licence
ONLY TWO (2) NOVICE LICENCES can EVER be obtained	
Not valid for Championship, Major Day or Speed/Time Trials	Can be upgraded to FULL or ½ YEAR Licences

### SINGLE EVENT LICENCES

An applicant must have held a FULL Licence in the previous year and show proof of it	Cannot be upgraded during the season – only additional Single Event Licences may be purchased
Are valid for the duration of a single sanctioned meeting	Requires the holder to obtain a current Medical Certificate

## HALF YEAR LICENCE FEES *(Costs inclusive of GST)*

**Only available from 1 March 2015**

	DRIVER Only	BOAT OWNER Only	OWNER/DRIVER	Additional Boats
Unrestricted / Limited	\$180.00	\$300.00	\$480.00	\$150.00
Restricted	\$180.00	\$200.00	\$380.00	\$100.00
Junior	\$30.00	\$40.00	\$70.00	\$20.00

### Payments by EFT (Electronic Funds Transfer)

NSW APBA **BSB: 062 234** **Account Number: 0080 0798**

**REFERENCE: please use your name & race number for the reference**

Please ensure that you print a copy of the receipt as proof that payment has been made – no receipt, no licence will be issued.



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**ALL CORRESPONDENCE TO: PO Box 23, REGENTS PARK NSW 2143**

**PLEASE NOTE:**

- **MEDICAL EXAMINATIONS ARE REQUIRED EVERY YEAR** – As with your APBA Licence, your medical expires on 31 August each year, regardless of when you had it done.
- **EMAIL ADDRESS** – IF YOU HAVE AN EMAIL ADDRESS, PLEASE COMPLETE THE SECTION OF YOUR LICENCE and/or BOAT OWNER APPLICATION – in this electronic age, the NSW Council and Clubs can send information to you faster and direct via email.

**RENEWAL CHECKLIST**

- MEDICAL EXAMINATION (FORM 22) OR JUNIOR MEDICAL (FORM 22FF)**
  - Regardless if you had a Medical last year, you will need a NEW Medical for this season.
  - The Junior Self-Assessing Medical must be filled in and signed off by a parent or guardian.
- LICENCE FORM (FORM 23 CL) – this form needs to be fully filled out. You must also have your Club Sign off that you are a current member. You will also need to include the following:**
  - A photocopy of your NSW Maritime or other State Boating Authority Boating Licence
  - Signatures or other documentation proving that you have raced on 2 occasions during 2012-13.

**Failure to provide documentation will result in a Probationary Licence being issued.**

  - Proof of Cockpit Immersion Testing.
- BOAT OWNER FORM (FORM 23 BO) – this form needs to be fully filled out. You must also have your Club Sign off that you are a current member. This form contains ALL information pertaining to your boat (or boats) and MUST be completed by YOU AND YOUR CLUB as proof of your current membership. Please include:**
  - A photocopy of your NSW Maritime or other State Boating Authority registration.
  - Hull Identification Number (HIN) and engine capacity
- ALL APPLICATIONS MUST INCLUDE PAYMENT: CHEQUES or MONEY ORDERS are to be made out in favour of Australian Power Boat Association – NSW Council.**
- If posting your Application, please allow 10 working days for processing.**

**YOUR APPLICATION WILL NOT BE PROCESSED AND RETURNED IF:**

- A photocopy of your NSW Maritime or other State Boating Authority Boat Licence and/or Boat Registration is not attached.
- Forms (*Medical/Licence/Boat Owner*) are NOT COMPLETE or NOT SIGNED by YOURSELF or YOUR CLUB. It is YOUR responsibility to prove you have current Club Membership – not ours!
- No Proof that you competed on at least 2 occasions during 2013-14 season. If there is no proof, you will be issued with a PROBATIONARY Licence. It is YOUR responsibility to get the required Licence signatures – not ours!
- There is NO Payment attached.

**IF POSTING YOUR LICENCE AND BOAT OWNER APPLICATIONS, PLEASE SEND TO:**

**NSW LICENCE OFFICER  
PO BOX 23  
REGENTS PARK NSW 2143**



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**27 August 2014**

**PAYMENT METHODS:**

Unfortunately, the NSW Council does not have EFTPOS or PayPal available as payment methods.

The only acceptable payment methods are:

- Cash
- Cheque (made out to NSW APBA)
- Money Order (made out to NSW APBA)
- EFT (Electronic Funds Transfer). If using EFT:

**BSB: 062 234                      Account Number: 0080 0798**

**Reference: please use your name & race number for the reference**

Please ensure that you print a copy of the receipt as proof that payment has been made – no receipt, no licence will be issued.

Licence Paperwork can be handed in at the following venues:

- Saturday 13 September – From 2pm at the Oasis Centre, Windsor (Reinforced Cockpit Test)
- Sunday 14 September – From 8am at Deepwater Motor Boat Club Race Day
- Friday 19 September – From 12 noon at Upper Hawkesbury Power Boat Club
- Saturday 20 September – From 7am to 9am at Upper Hawkesbury Power Boat Club
- A computer with internet access will be set up at the UHPBC Spectacular for those who wish to pay by EFT on the day

**IF NOT PAYING IN PERSON, PLEASE SEND TO:                      NSW LICENCE OFFICER  
PO BOX 23  
REGENTS PARK NSW 2143**

**NSW LICENCE FEES FOR 2014-2015** *(Costs inclusive of GST)*

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**HALF YEAR LICENCE FEES** *(Costs inclusive of GST)*

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Junior	\$30.00	\$40.00	\$70.00	\$20.00

**IF POSTING YOUR LICENCE / BOAT OWNER APPLICATIONS, PLEASE SEND TO:**

**NSW LICENCE OFFICER  
PO BOX 23  
REGENTS PARK NSW 2143**

Tick one box 		<b>LICENCE RENEWAL</b>		<b>NEW LICENCE APPLICATION</b>	
NAME:					
ADDRESS:					
SUBURB:		POST CODE:			
PHONE:		DATE OF BIRTH:			
EMAIL:					
<b>APBA AFFILIATED CLUB:</b>				<b>CLUB MEMBERSHIP EXPIRES:</b>	
<b>STATE BOATING AUTHORITY LICENCE NUMBER:</b>				<b>STATE OF ISSUE:</b>	
<b>STATE BOATING AUTHORITY EXPIRY DATE:</b>				<b>APBA RACE No:</b>	
<b>NEXT OF KIN – NAME AND CONTACT NUMBER:</b>					
<b>ARE YOU REQUIRED TO WEAR CONTACTS OR GLASSES WHEN RACING:</b>		YES		NO	

<b>CLASS OF LICENCE</b> (Multiple classes are permitted)		<input checked="" type="checkbox"/>
INBOARD DISPLACEMENT	I	
INBOARD HYDROPLANE	IH	
OUTBOARD (excluding Hydro & Tunnels)	O	
OUTBOARD HYDROPLANE	OH	
OFFSHORE	OS	
<b>REINFORCED COCKPIT TEST:</b> A Reinforced cockpit test is required every 2 years		<input checked="" type="checkbox"/>
<b>I HAVE</b> completed a test in the past 2 years (Provide proof or Date of Last Test)		
<b>I HAVE NOT</b> completed a test in the past 2 years		

<b>LICENCE GRADE (one only)</b>	<input checked="" type="checkbox"/>
UNLIMITED	
LIMITED	
RESTRICTED (including Formula 4-S)	
<b>CATEGORY OF LICENCE (one only)</b>	<input checked="" type="checkbox"/>
FULL YEAR	
PROBATIONARY	
HALF YEAR	
SINGLE EVENT	

To be eligible to compete in any APBA Sanctioned event, the Boat Owner is required to have current financial membership of the APBA and the driver must hold an appropriately endorsed APBA Competition Licence.

**DECLARATION BY THE APPLICANT:** *An applicant making a false declaration is liable to refusal or cancellation of membership.*

I hereby apply for the issue/renewal of an APBA Competition Licence, endorsed for the type and class of boat that I am experienced in driving as indicated by myself on this application. I declare that:

- I am in possession of, or will obtain the current Racing & Safety Rules Book and will abide by the Rules & Regulations contained therein.
- I will not do anything that will bring powerboat racing or the Australian Power Boat Association into disrepute.
- I am in possession of a current State Boating Licence as required by my State Boating Authority and I acknowledge that this application is conditional on compliance with the applicable State Boating Authority requirements.
- the particulars given in this application are true and correct.
- I will notify the Association if any changes to the information on this application occurs.
- I agree that if my membership of an APBA Affiliated Club lapses or is terminated that I will notify the Association. I understand that I will cease to be a member of the Australian Power Boat Association if my membership to an APBA Affiliated Club ceases.

<b>SIGNATURE OF APPLICANT:</b>	<b>PRINT NAME:</b>	<b>DATE:</b>
<b>SIGNATURE OF WITNESS:</b>	<b>PRINT NAME:</b>	<b>DATE:</b>

**DECLARATION BY THE APPLICANTS CLUB:** *(To be completed only by an authorised Club Official - strike out the sections that DO NOT apply)*

I certify that the above named is a Full Financial Member of the above-mentioned APBA Affiliated Club. Their declaration is to the best of my knowledge and belief is true and correct. **I HAVE / HAVE NOT sighted the documents referred to in this application.**

<b>SIGNATURE of CLUB OFFICIAL</b>	<b>PRINT NAME</b>	<b>OFFICE HELD</b>	<b>DATE</b>

**LICENCE ISSUING OFFICER USE ONLY**

<b>Licence Number:</b>	<b>Date Issued</b>	<b>Issued by:</b>

Return the completed form to: NSW Licence Officer, PO Box 23, REGENTS PARK NSW 2143

# MEDICAL FORM

## IMPORTANT NOTES TO APPLICANT

1. Please complete sections 1, 2 & 3 of this form. Print clearly with a black ballpoint pen  
These sections must be done prior to visiting the Medical Examiner (Doctor)
2. Prior to your visit to the Medical Examiner you should telephone for an appointment
3. Sections 1, 2, 3 & 4 of this form are retained by the Medical Examiner for their records.
4. Section 5 is returned with your licence paperwork to your Member Council Licence Officer – NSW Licence Officer, PO Box 23, REGENTS PARK NSW 2143

## SECTION 1 – TO BE COMPLETED BY APPLICANT

SURNAME:			
GIVEN NAMES:			
RESIDENTIAL ADDRESS:			
STATE:		POST CODE:	
POSTAL ADDRESS: (If different from residential address)			
STATE:		POST CODE:	
PHONE (HOME):		PHONE (WORK):	
MOBILE:		FAX:	
EMAIL:			
OCCUPATION:			
DATE OF BIRTH:			

## SECTION 2 – TO BE COMPLETED BY APPLICANT

STATEMENT BY APPLICANT		<i>Please tick</i>	YES	NO
A	Do you at present have any disease or disability?			

### HAVE YOU EVER SUFFERED FROM:

B	Anxiety State. Depression or any nervous or mental disorder?		
C	Headaches - recurrent or severe?		
D	Epilepsy, fits, turns or blackouts?		
E	Fainting, giddiness or dizziness?		
F	Head injury or concussion?		
G	Tuberculosis, Bronchitis, Asthma or Pneumonia?		
H	Rheumatic Fever or heart disease?		
I	Indigestion, gastric or duodenal ulcer?		
J	Kidney or bladder trouble?		
K	Diabetes?		
L	Anemia or other blood disorder?		
M	Jaundice, hepatitis or glandular fever?		
N	Noises in ear, earache or discharge?		
O	Chronic sinus trouble?		
P	Any surgical operation?		
Q	Any fracture or broken bones?		
R	Any illness or injury not mentioned?		
S	Wear glasses or contact lenses?		
T	Take any tablets, injections or other form of medication?		

For each 'Yes' answer, please provide full details (including dates where applicable) in the space below:


Note: if there is not enough space here, please attach an additional page with the details.

## SECTION 3 - DECLARATION TO BE COMPLETED BY APPLICANT

I, \_\_\_\_\_ hereby declare that I have carefully considered my answers to the questions above, and that to the best of my knowledge that they are complete and correct and I have not withheld any information or made any misleading statement.

Furthermore, I declare that, should I sustain any accident or injury, or should any of the above answers not continue to apply throughout the currency of any licence issued to me based on this medical examination, I agree to immediately surrender such licence to the APBA and agree to submit myself for a further medical examination.

I authorise the Medical Assessor, or his/her representative to obtain relevant clinical records, X-rays and pathology reports from any hospital or medical practitioner that I have previously attended.

If a female applicant, I agree to abstain from exercising the privileges of this licence in the last four (4) months of pregnancy.

Date:		Signature of Applicant:	
Witness or Medical Examiner:			

# SECTION 4

## CONFIDENTIAL REPORT BY MEDICAL EXAMINER

AGE		HEIGHT		WEIGHT	
PULSE RATE			BLOOD PRESSURE		
		Tick Answers			
		Normal	Abnormal	Normal	Abnormal
CARDIOVASCULAR SYSTEM			CENTRAL NERVOUS SYSTEM		
Heart Size				Intellect	
Heart Sounds				Deep Reflexes	
Murmurs				Coordination	
ECG (if required)					
RESPIRATORY SYSTEM			LIMBS		
Air Entry				Deformity	
Breath Sounds				Range of Joint Movement	
Accompaniments					
ABDOMEN			URINE		
Viscera				Protein	
Hernia Orifices				Glucose	
ENT & VESTIBULAR SYSTEMS			VISUAL SYSTEM		
Tympana				Eyes – any Abnormality	
Nystagmu				General Inspection	
Sharpened Rhomberg				Eye Movements, cover test	
				Fields, confrontation test	

### VISUAL ACTIVITY

NATURAL SIGHT	Right	Left
	6 /	6 /

WITH CORRECTION SPECTACLES / CONTACT LENSES	Right	Left
	6 /	6 /

### EXAMINERS COMMENTS

On history

On examination

# SECTION 5

THIS PAGE ONLY TO BE RETURNED TO YOUR  
AUSTRALIAN POWER BOAT ASSOCIATION MEMBER COUNCIL

## MEDICAL EXAMINATION RECORD

PLEASE PRINT CLEARLY WITH A BLACK OR BLUE PEN

### APPLICANT DETAILS

SURNAME:	
GIVEN NAMES:	
RESIDENTIAL ADDRESS:	
DATE OF BIRTH:	

### STATEMENT BY EXAMINER

Today, I have examined \_\_\_\_\_

and find this applicant **FIT / UNFIT** to participate in Power Boat Racing.

Name of Medical Examiner (*please print*): \_\_\_\_\_

\_\_\_\_\_  
Signature of Medical Examiner

\_\_\_\_\_  
Date of Medical Examination

**To enable the applicant to be given a licence, it is required that the Medical Examiner's stamp be placed over his/her signature. Failure to do this will result in the non-acceptance, by the Australian Power Boat Association, of this application.**

### APBA OFFICE USE ONLY

Date:	
Licence No.:	
Race No.:	
Next medical due:	



<b>Tick one box</b>	<b>BOAT OWNER RENEWAL</b>		<b>NEW BOAT OWNER APPLICATION</b>
<b>NAME:</b>			
<b>ADDRESS:</b>			
<b>SUBURB:</b>		<b>POST CODE:</b>	
<b>PHONE:</b>		<b>DATE OF BIRTH:</b>	
<b>EMAIL:</b>			
<b>APBA AFFILIATED CLUB:</b>		<b>CLUB MEMBERSHIP EXPIRES:</b>	
<b>BOAT REGISTRATION NUMBER:</b>		<b>STATE OF ISSUE:</b>	
<b>BOAT REGISTRATION EXPIRY DATE:</b>		<b>APBA RACE No</b>	
<b>HULL IDENTIFICATION NUMBER (HIN):</b>			
<b>BOAT NAME:</b>		<b>ENGINE CAPACITY:</b>	

TYPE OF BOAT		<input checked="" type="checkbox"/>
INBOARD DISPLACEMENT	I	
INBOARD HYDROPLANE	IH	
OUTBOARD (excluding Hydro & Tunnels)	O	
OUTBOARD HYDROPLANE	OH	
FORMULA FUTURE	FF	
OFFSHORE	OS	

GRADE OF BOAT (one only)	<input checked="" type="checkbox"/>
UNLIMITED	
LIMITED	
RESTRICTED	
FORMULA FUTURE	
ADDITIONAL BOAT	
<b>CATEGORY OF MEMBERSHIP</b>	<input checked="" type="checkbox"/>
FULL YEAR	
HALF YEAR	
SINGLE EVENT	

To be eligible to compete in any APBA Sanctioned event, the Boat Owner is required to have current financial membership of the APBA and the driver must hold an appropriately endorsed APBA Competition Licence

**DECLARATION BY THE APPLICANT:** *An applicant making a false declaration is liable to refusal or cancellation of membership*

I hereby apply for the issue/renewal of an APBA Boat Owner Licence, the grade of boat specified herein. I declare that:

- I am in possession of, or will obtain the current Racing & Safety Rules Book and will abide by the Rules & Regulations contained therein.
- **I will not do anything that will bring powerboat racing or the Australian Power Boat Association into disrepute.**
- I am in possession of a current Boat Registration as required by my State Boating Authority and I acknowledge that this application is conditional on compliance with the applicable State Boating Authority requirements.
- The particulars given in this application are true and correct.
- I will notify the Association if any changes to the information on this application occur.

I agree that if my membership of an APBA Affiliated Club lapses or is terminated that I will notify the Association. I understand that I will cease to be a member of the Australian Power Boat Association if my membership to an APBA Affiliated Club ceases.

<b>SIGNATURE OF APPLICANT:</b>	<b>PRINT NAME:</b>	<b>DATE:</b>
<b>SIGNATURE OF WITNESS:</b>	<b>PRINT NAME:</b>	<b>DATE:</b>

**DECLARATION BY THE APPLICANTS CLUB:** *(To be completed only by an Authorised Club Official)*

I certify that the above named is a Full Financial Member of the abovementioned APBA Affiliated Club. Their declaration is to the best of my knowledge and belief is true and correct. **I HAVE / HAVE NOT sighted the documents referred to in this application.**

<b>SIGNATURE of CLUB OFFICIAL</b>	<b>NAME of OFFICIAL (Please print)</b>	<b>OFFICE HELD</b>	<b>DATE</b>


**STATISTICAL INFORMATION ONLY**

<b>Will your boat enter any APBA Championships this season?</b>			
<b>Does the boat compete mainly in:</b>	<b>Club Events:</b>	<b>Spectaculars/Major Days:</b>	<b>Mix of both:</b>

**LICENCE ISSUING OFFICER USE ONLY**

<b>Licence/Race No:</b>	<b>Date Issued:</b>	<b>Issued by:</b>

Return completed form to: NSW Licence Officer, PO Box 23, REGENTS PARK NSW 2143

Tick one box 	<b>LICENCE RENEWAL</b>		<b>NEW LICENCE APPLICATION</b>	
NAME:				
ADDRESS:				
SUBURB:		POST CODE:		
PHONE:		DATE OF BIRTH		
EMAIL				
<b>APBA AFFILIATED CLUB:</b>			<b>CLUB MEMBERSHIP EXPIRES:</b>	
<b>STATE BOATING AUTHORITY YOUNG ADULT LICENCE NUMBER:</b>			<b>STATE OF ISSUE:</b>	
<b>STATE BOATING AUTHORITY LICENCE EXPIRY DATE:</b>			<b>APBA RACE No:</b>	
<b>NEXT OF KIN – NAME AND CONTACT NUMBER:</b>				
<b>ARE YOU REQUIRED TO WEAR CONTACTS OR GLASSES WHEN RACING:</b>		YES		NO

<b>CATEGORY OF LICENCE (one only)</b>	<input checked="" type="checkbox"/>
FULL YEAR	
HALF YEAR ( <i>only available after 1 March</i> )	
<b>REINFORCED COCKPIT ORIENTATION</b> A Reinforced cockpit test is required every 2 years	<input checked="" type="checkbox"/>
I HAVE completed the Orientation in the past 2 years (please provide proof or date of last test)	
I HAVE NOT completed the Orientation in the past 2 years	

<b>FORMULA FUTURE SAFETY ORIENTATION</b>	
I HAVE completed a Formula Future Safety Orientation (please provide proof or date of last test)	
I HAVE NOT completed a Formula Future Safety Orientation	

To be eligible to compete in any APBA Sanctioned event, the Boat Owner is required to have current financial membership of the APBA and the driver must hold an appropriately endorsed APBA Competition Licence.

**DECLARATION BY THE APPLICANTS PARENT OR GUARDIAN:**

*An applicant making a false declaration is liable to refusal or cancellation of membership.*

I hereby apply on behalf of my child for the issue / renewal of an APBA Competition Licence, endorsed for the type and class of boat that my child is experienced in driving as indicated on this application. I declare that:

- The applicant is in possession of, or will obtain the current Racing & Safety Rules Book and will abide by the Rules & Regulations contained therein.
- **Neither myself or the applicant will do anything that will bring powerboat racing or the Australian Power Boat Association into disrepute.**
- The applicant is in possession of a current State Boating Licence as required by my State Boating Authority and I acknowledge that this application is conditional on compliance with the applicable State Boating Authority requirements.
- the particulars given in this application are true and correct.
- I will notify the Association if any changes to the information on this application occurs.
- I agree that if my or the applicants membership of an APBA Affiliated Club lapses or is terminated that I will notify the Association. I understand that I will cease to be a member of the Australian Power Boat Association if my membership to an APBA Affiliated Club ceases.

<b>SIGNATURE OF APPLICANTS PARENT or GUARDIAN:</b>	<b>SIGNATURE OF WITNESS</b>	<b>DATE:</b>

**DECLARATION BY THE APPLICANTS CLUB:**

*To be completed only by an authorised Club Official - strike out the sections that DO NOT apply.*

I certify that the above named is a Member of the above-mentioned APBA Affiliated Club. Their declaration is to the best of my knowledge and belief is true and correct. **I HAVE / HAVE NOT sighted the documents referred to in this application.**

<b>SIGNATURE of CLUB OFFICIAL</b>	<b>NAME of OFFICIAL (Please print)</b>	<b>OFFICE HELD</b>	<b>DATE</b>

**LICENCE ISSUING OFFICER USE ONLY**

<b>Licence Number:</b>	<b>Date Issued</b>	<b>Issued by:</b>

**Return the completed form to: NSW Licence Officer, PO Box 23, REGENTS PARK NSW 2143**

<b>APPLICANT DETAILS</b>	
SURNAME _____	First Name _____
ADDRESS _____	
_____ POSTCODE _____	
Phone Number: _____	Date of Birth: ___ / ___ / ___
Has your child ever been refused an APBA Licence? YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>BY SIGNING THIS FORM I CERTIFY THAT:</b>	
My Child has no other illnesses, conditions or any other physical or mental condition that would make it dangerous for them or others driving a racing powerboat.	
That my child has not been advised by any medical person to refrain from contact sports or activities where physical exertion is required, or from activities where my child will be subject to physical abuse.	

LICENCE OFFICER USE ONLY	
LICENCE NUMBER	YEAR
FORMULA FUTURE LICENCES ONLY	

HAS YOUR CHILD EVER SUFFERED FROM:									
1	Nervous Disorder? (Nerves, Neurasthenia or anxiety attack)	YES <input type="checkbox"/>	NO <input type="checkbox"/>		10	Earache or discharge?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
2	Headaches?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		11	Surgical operation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
3	Fits or convulsions, blackouts, fainting or giddiness?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		12	Injuries related to Motor Sport?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
4	Asthma or lung disease?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		13	Other injuries?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
5	Epilepsy?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		14	Other illnesses not mentioned?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
6	Head Injury or concussion?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		15	Any form of medication taken on a regular basis, as prescribed by a medical professional?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
7	Diabetes?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		16	Any known allergies?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
8	Heart Disease?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		17	Bleeding disorders?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
9	Deafness or noises in the ear?	YES <input type="checkbox"/>	NO <input type="checkbox"/>						
IF YES TO ANY OF THE ABOVE, STATE QUESTION NUMBER AND GIVE FULL DETAILS HERE (Attach a separate sheet if insufficient space provided)									

**DECLARATION TO BE SIGNED BY PARENT or GUARDIAN:** *(An applicant making a false declaration is liable to refusal or cancellation of licence)*

In case of a dispute, I understand that an APBA appointed Medical Assessor will make the final decision.

I hereby declare that I have not withheld any relevant information or made any misleading statement.

Furthermore, I declare that, should any of the above conditions become evident during the currency of this licence, I agree to withdraw my child from exercising the privileges of this licence, and to notify the APBA Medical Assessor and submit my child to a further medical examination, the results of which are to be forwarded to that assessor.

I undertake not to allow my child to use any drugs, medication or substances that might be considered illegal within a period of 48 hours prior to using this competition licence, which might have any affect upon his/her performance, concentration or driving ability.

I agree to undertake to allow my child any drug analysis tests, including for alcohol that may be considered necessary by the APBA.

I hereby give my full authority to the APBA Medical Assessor to obtain the relevant Clinical Records, X-ray and Pathology Reports and from any Medical Officer that my child has previously attended.

<b>SIGNATURE OF APPLICANTS PARENT or GUARDIAN:</b>	<b>PRINT NAME</b>	<b>DATE:</b>
<b>SIGNATURE OF WITNESS:</b>	<b>PRINT NAME</b>	

**Return the completed form to: NSW Licence Officer, PO Box 23, REGENTS PARK NSW 2143**

## NSW RACE DATES – 2014/2015

September 2014.

<b>13</b>	NSW Council reinforced cockpit test (2pm start)	Oasis Centre Windsor	
<b>14</b>	Deepwater Motor Boat Club (Club Day)	Milperra NSW	<b>C3</b>
<b>19/20/21</b>	<b>Upper Hawkesbury Power Boat Club (Spectacular)</b>	Windsor NSW	<b>C2</b>
<b>28</b>	Raymond Terrace Aquatic Club (Club Day & Rd 1 Blue Water Oyster F/F Series)	Raymond Terrace NSW	<b>C3</b>

October 2014.

<b>4</b>	St George Aquatic Club (Club Day)	Sans Souci NSW	<b>C3</b>
<b>17/18/19</b>	<b>NSW Council – Combined Australian Championships</b>	<b>Lake Wyangan, Griffith NSW</b>	<b>C1</b>
<b>26</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>

November 2014

<b>2</b>	Raymond Terrace Aquatic Club (Rd 2 Blue Water Oyster Series)	Raymond Terrace NSW	<b>C3</b>
<b>8</b>			
<b>9</b>	St George Aquatic Club – Spectacular – Stuart Doyle – NSW Unlimited Displacement Championship	Sans Souci NSW	<b>C2</b>
<b>15/16</b>	Australian Formula Powerboat Grand Prix (Lake Albert)	Wagga Wagga NSW	<b>C2</b>
<b>23</b>	Upper Hawkesbury Power Boat Club (Club Day) ( <i>Marj Watson &amp; Dorwin Mtg in SA</i> )	Windsor NSW	<b>C3</b>
<b>29/30</b>	Taree Aquatic Power Boat Club (Club Day)	Macksville NSW	<b>C3</b>

December 2014.

<b>6</b>	Deepwater Motor Boat Club (Club Day)	Milperra NSW	<b>C3</b>
<b>7</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>
<b>7</b>	Raymond Terrace Aquatic Club.(Rd3 Blue Water Oyster Series)	Raymond Terrace NSW	<b>C3</b>
<b>13</b>	St George Aquatic Club (Club Day)	San Souci NSW	<b>C3</b>

January 2015.

<b>24</b>	Deepwater Motor Boat Club ( <b>Aust. F/Future C'ships</b> )	Milperra NSW	<b>C3</b>
<b>25</b>	Deepwater Motor Boat Club (Club Trophy Day)	Milperra NSW	<b>C3</b>
<b>31</b>	St George Aquatic Club (Club Day)	Sans Souci NSW	<b>C3</b>

February 2015.

<b>8</b>	Raymond Terrace Aquatic Club (Club Day)	Raymond Terrace NSW	<b>C3</b>
<b>8</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>
<b>15</b>	Taree Aquatic Power Boat Club (Club Day)	Taree NSW	<b>C3</b>
<b>21/22</b>	Australian Formula Powerboat Grand Prix	Gold Coast QLD	<b>C2</b>
<b>28</b>	NSW State Reinforced Cockpit Testing (2pm Start)	Oasis Centre, Windsor NSW	

March 2015.

<b>1</b>	Deepwater Motor boat Club (Lowe & Burns Family Trophy Day)	Milperra NSW	<b>C3</b>
<b>8</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>
<b>14</b>	St George Aquatic Club (Club Day)	San Souci NSW	<b>C3</b>
<b>15</b>	Raymond Terrace Aquatic Club (Club Day)	Raymond Terrace NSW	<b>C3</b>

April 2015,

<b>3/4/5</b>	<b>TAPBC – Easter Classic – Australian GP Hydro Championship – Mary &amp; Ernie Nunn Rd 2</b>	Taree NSW	<b>C2</b>
<b>12</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>
<b>18/19</b>	Australian Formula Powerboat Grand Prix ( <b>Lake Mulwala</b> )	Mulwala NSW	<b>C2</b>

May 2015.

<b>2/3</b>	Upper Hawkesbury Power Boat Club – <b>Bridge to Bridge Powerboat Classic</b>	Windsor NSW	<b>C3</b>
<b>16</b>	St George Aquatic Club (Club Day)	San Souci NSW	<b>C3</b>
<b>31</b>	Deepwater Motor Boat Club (Club Day)	Milperra NSW	<b>C3</b>

## NSW RACE DATES – 2014/2015

June 2015

<b>6/7</b>	<b>Dargle Valley Boat Club – Spectacular</b>	<b>Lower Portland NSW</b>	<b>C1</b>
<b>13</b>	St George Aquatic Club (Club Day)	San Souci NSW	<b>C3</b>
<b>14</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>
<b>20/21</b>	Australian Formula Power Boat Grand Prix (Clarence River)	Grafton NSW	<b>C2</b>

July 2015.

<b>4/5</b>	Taree Aquatic Power Boat Club (Boaties Reunion)	Forster NSW	<b>C3</b>
<b>18/19</b>	<b>St George Aquatic Club – Spectacular</b>	<b>San Souci NSW</b>	<b>C2</b>
<b>26</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>

August 2015.

<b>1/2</b>	Australian Formula Power Boat Grand Prix (Hastings River)	Port Macquarie NSW	<b>C2</b>
<b>15/16</b>	Raymond Terrace Aquatic Club (Club Trophy Day)	Raymond Terrace NSW	<b>C3</b>
<b>16</b>	Upper Hawkesbury Power Boat Club (Club Day)	Windsor NSW	<b>C3</b>
<b>22</b>	St George Aquatic Club (Club Day)	San Souci NSW	<b>C3</b>
<b>30</b>	Taree Aquatic Power Boat Club (Club Day)	Taree NSW	<b>C3</b>

**PRESIDENT: GLENN BANKS**  
**Mobile: 0431 207 029**

**SECRETARY: GLENN BURNS**  
**Mobile: 0408 019 739**

**E-mail: [nswcouncilapba@hotmail.com](mailto:nswcouncilapba@hotmail.com)**

**ALL CORRESPONDENCE TO: PO Box 23, REGENTS PARK NSW 2143**

NEW SOUTH WALES STATE COUNCIL – PO Box 23 REGENTS PARK NSW 2143			
<b>Email:</b>	nswcouncilapba@hotmail.com		<b>Website:</b> www.nswapba.net.au
<b>Patron</b>	Charles Mayfield	02 4573 6911	
<b>Patron &amp; RMS Delegate</b>	Geoff Duvall	0409 900 418	
<b>President &amp; Rules Officer</b>	Glenn Banks	0431 207 029	apbapresident@hotmail.com
<b>Secretary &amp; Licence Officer</b>	Glenn Burns	0408 019 739	nswcouncilapba@hotmail.com
<b>Treasurer</b>	Debbie Greentree	0408 581 785	treasurer.nswapba@gmail.com
<b>Senior Vice President &amp; Safety Officer</b>	Ron Beasley	0422 033 478	ronaldbeasley@bigpond.com
<b>Vice President Inboards</b>	Wayne Smith	0439 421 840	weplayrite@skymesh.com.au
<b>Vice President Outboards</b>	John Cohen	0433 660 112	riverfrontlogistics@live.com.au
<b>Vice President Formula Futures</b>	Nicole Kirkwood	0417 650 259	Nicole.kirkwood@bigpond.com

AUSTRALIAN and STATE REFEREES			
HONORARY AUSTRALIA REFEREES		STATE REFEREES	
John Hudson	1986	Alan Baker	Shane Greentree
Stephen Medaris	1986	Nicole Kirkwood	Joy Smith
AUSTRALIAN REFEREES		John Fowler	Kathryn Beasley
Alan Blake	1986	Alan Smith	Rebecca Fowler
Charles Mayfield	1991	Joe Fountain	Malcolm Forsyth
Glenn Burns	1995	Ricky Howard	Bruce Lyall
David Toyer	1995	Micheal Beasley	Craig Mitchell
Alex Taylor	2001		
Glenn Banks	2006		
Ron Beasley	2006		
Robert Beasley	2006		

NSW APPROVED REINFORCED COCKPIT ORIENTATION OBSERVERS			
Craig Bailey	Geoff Bollins	Ricky Howard	Wayne Smith
Glenn Banks	Glenn Burns	Nicole Kirkwood	Alex Taylor
Robert Beasley	John Fowler	Paul Madill	Mick Thom
Ron Beasley	Shane Greentree	Charles Mayfield	Sean Walker

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**ALL CORRESPONDENCE TO: PO Box 23, REGENTS PARK NSW 2143**

NSW ENGINE MEASURERS				
<b>N1</b>	William Parker	<b>O/I</b>	East Seaham	0432 449 510
<b>N2</b>	David Connolly	<b>O</b>	Swansea	02 4972 0796
<b>N3</b>	Greg Hodges	<b>I</b>	Raymond Terrace	02 4987 2760
<b>N4</b>	Corey Davoll	<b>O</b>	Wilberforce	0402 610 205
<b>N5</b>	Ron Beasley	<b>O/I</b>	Paxton	0422 033 478
<b>N6</b>	Craig Bailey	<b>O</b>	Caringbah	0415 220 101
<b>N7</b>	Colin Hughes	<b>I</b>	Fletcher	0403 244 076
<b>N8</b>	Alan Blake	<b>O/I</b>	McGraths Hill	02 4577 6699
<b>N10</b>	Nick Ames	<b>O</b>	Miranda	0408 024 311
<b>N14</b>	Michael Wojcikewycz	<b>I</b>	Tuncurry	02 6559 2165
<b>N15</b>	<b>Shane Greentree (Senior Measurer)</b>	<b>I</b>	St. Clair	02 9670 5553
<b>N16</b>	Tony Williams	<b>I</b>	Richmond	02 4578 4199
<b>N17A</b>	Malcolm Forsyth	<b>I</b>	Eagleton	02 4988 6069
<b>N18</b>	Damien Baker	<b>I</b>	North Richmond	02 4571 4666
<b>N18A</b>	Des Maslen	<b>O/I</b>	Williamson	0400 317 886
<b>NSW HOLD</b>	<b>NSW Secretary</b>		<b>Holding Seal Only</b>	0408 019 739

NSW COUNCIL LIFE MEMBERS			
<b>David Toyer</b>	<b>1990</b>	<b>Alex Taylor</b>	<b>2005</b>
<b>Charles Mayfield</b>	<b>1997</b>	<b>Ron Beasley</b>	<b>2008</b>
<b>Glenn Burns</b>	<b>2000</b>	<b>Glenn Banks</b>	<b>2013</b>
<b>Shane Greentree</b>	<b>2000</b>		



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<b>NSW MEMBER CLUBS</b>			
<b>AUSTRALIAN FORMULA POWERBOAT GRAND PRIX</b> <b>Email:</b> secretary@formulapowerboats.com.au <b>Website:</b> www.formulapowerboats.com.au	Gavin Simmons President	0451 953 105	PO Box 352 Raymond Terrace NSW 2324
<b>DARGLE VALLEY BOAT CLUB</b> <b>Email:</b> dargle1@bigpond.com <b>Website:</b> www.dargle.com.au	Joy Smith Secretary	02 4579 1295	"Dargle" 353 River Road Lower Portland NSW 2756
<b>DEEPWATER MOTOR BOAT CLUB</b> <b>Email:</b> dmbcracing@hotmail.com <b>Website:</b> www.deepwatermbc.com	Max Sullivan Commodore	0415 650 754	PO Box 227 Panania NSW 2213
<b>FAST POWER BOAT CLUB</b> <b>Email:</b> fastwaterpromotions@bigpond.com <b>Website:</b> www.fastwater.com.au	Tony Walsh President	0418 673 458	PO Box 27 Mansfield Park SA 5012
<b>NSW HYDROPLANE CLUB</b> <b>Email:</b> nmills@ignitedesign.com.au <b>Website:</b> www.ignitedesign.com.au/NSWHC	Nathan Mills President	0418 45 7788	577 Singleton Road Loughtondale NSW 2775
<b>RAYMOND TERRACE AQUATIC CLUB</b> <b>Email:</b> rtacapba@hotmail.com	Rebecca Fowler Secretary	02 4951 6988	PO Box 275 Raymond Terrace NSW 2324
<b>ST GEORGE AQUATIC CLUB</b> <b>Email:</b> commodore@stgeorgeaquaticclub.com.au <b>Website:</b> www.stgeorgeaquaticclub.com.au	Craig Roberts Commodore	0400 031 956	c/- 2 Wellington Street Sans Souci NSW 2219
<b>TAREE AQUATIC POWER BOAT CLUB</b> <b>Email:</b> secretary@tareepowerboatclub.org.au <b>Website:</b> www.tareepowerboatclub.org.au	Secretary	0431 489 522	PO Box 626 Taree NSW 2430
<b>UPPER HAWKESBURY POWER BOAT CLUB</b> <b>Email:</b> uhpbcsecretary@gmail.com <b>Website:</b> www.uhpbc.net	John Davoll Commodore	0411 874 615	PO Box 161 Windsor NSW 2756