



CLUB MEMBERSHIP APPLICATION



Current Membership#: _____

Full Member

Social Member

SURNAME: Mr / Mrs / Ms / Miss _____

GIVEN NAMES: _____ PREFERRED NAME: _____

RESIDENTIAL ADDRESS: _____ POST CODE: _____

POSTAL ADDRESS: _____ POST CODE: _____

HOME PHONE: _____ MOBILE PHONE: _____

EMAIL: _____

DATE OF BIRTH: ___/___/___

Please remove me from any direct marketing mailing lists promoting the club's activities and promotions.

Please remove me from the loyalty card reward system

I, the above-named certify that I am over the age of eighteen (18) years of age, and request that you enter my name in the Register of Members as a social / associate member, I agree to be bound by the constitution and by-laws of the club that are from time to time in force.

PLEASE SIGN
HERE



APPLICANT'S SIGNATURE: _____ DATE: ___/___/___