

Membership No.

Bonus Points No.

Barcode No.



177-179 Baillie St
 PO Box 197
 Horsham 3400
 Phone: 03 5382 6262
 Fax: 03 5382 6649

Application for GOLD Membership

Please circle Mr / Mrs / Miss / Ms

Given Names	_____	Surname	Surname	_____
Residential Address	_____	Date of Birth	_____		_____
Postal Address	_____	Telephone Home	_____		_____
Post Code	_____	Mobile Phone	_____		_____
Occupation	_____	Email address	_____		_____

Do you wish your membership to be recognised in favour of a Sporting Club or Community Group? Yes/No

If yes, name Club/Organisation:.....

Do you wish to be included on the club's mail list? Yes / No

Identification Sighted
 Staff member

Initial:	<input type="text"/>	Type of ID	<input type="text"/>	Number	<input type="text"/>
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Declaration By Nominee (Applicant)

1. That if elected as a Member of the Club I will be bound by and observe the Club Memorandum and Articles of Association in the terms in which they exist from time to time and any Rules and By-Laws made thereunder.

2. I declare that the above particulars are true and correct

Signature of Nominee Date.....

\$11.00 MEMBERSHIP FEE TO ACCOMPANY APPLICATION INCLUDES GST

Declaration of Proposer

I declare that I have known
 For a period ofyears. I further declare that I personally know the candidate to be of good character.

Signature of Proposer Membership Number

Declaration of Secunder

I declare that I have known
 For a period ofyears. I further declare that I personally know the candidate to be of good character.

Signature of Secunder Membership Number

WARNING: Club By-Laws provide for disciplinary action to be taken against members who abuse the privileges of their membership. Membership is not transferable.

Office use only:	
Date Paid:	_____
Database:	_____
POS:	_____
Print card:	_____
Tatts DB:	_____