

WOONONA BULLI RSL MEMORIAL CLUB MEMBERSHIP APPLICATION FORM



<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms			
Surname:			
Given Names:			
Date of Birth:			
Address:			
Suburb:			
State:		Postcode:	
Mobile:		Home:	
Email Address:		ID (e.g. Licence):	
INFORMATION			
Notice of Annual General Meeting <input type="checkbox"/> Email (Default) <input type="checkbox"/> Mail			
Birthday Card: <input type="checkbox"/> Yes <input type="checkbox"/> No			
MEMBERS MUST BE FINANCIAL MEMBERS OF THE CLUB BY THE LAST DAY THE MONTH PRIOR TO THEIR BIRTHDAY TO RECEIVE BIRTHDAY OFFERS.			
Gaming Offers: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Club Offers and Promotions: <input type="checkbox"/> Yes <input type="checkbox"/> No			
MEMBERSHIP TYPE			
<input type="checkbox"/> 1 Year Membership \$8 <input type="checkbox"/> 3 Year Membership \$18 <input type="checkbox"/> 5 Year Membership \$25			
I am aware that I may withdraw at any time by written notification to the Club. Annual reports are available to be viewed on our website in April each year. I hereby agree to abide by the Constitution and By-Laws adopted by Woonona Bulli RSL Memorial Club Ltd.			
Signature:		Join Date:	
OFFICE USE ONLY			
<input type="checkbox"/> 1 Year Membership \$8 <input type="checkbox"/> 3 Year Membership \$18 <input type="checkbox"/> 5 Year Membership \$25			
Membership No:			
Receipt No:			
ID:			
Sighted by Staff:		Date:	
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