

# Narrabeen RSL

## Memorial & Recreational Club Limited

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www.narrabeenrsl.com.au

### MEMBERSHIP APPLICATION FORM

To the Secretary Manager,

I, Mr / Mrs / Ms / Miss \_\_\_\_\_

Surname

(BLOCK LETTERS)

Given Names

Of \_\_\_\_\_

Address

State

Postcode

Occupation \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone (Private) \_\_\_\_\_ Phone (Work) \_\_\_\_\_

Phone (Mobile) \_\_\_\_\_ Email \_\_\_\_\_

Wish to apply for Membership of Narrabeen RSL Memorial & Recreational Club Ltd

I request you enter my name on the Register of Members as an **ORDINARY** or **ASSOCIATE** Member.

I agree to be bound by your Articles of Association, Rules and By-Laws and any Rules, Regulations or By Laws of the Club from time to time in force. I have attained the age of eighteen (18) years.

(a) State if a present member of the NARRABEEN SUB-BRANCH of the RSL **Yes / No**

(b) State if present or past member of any other club **Yes / No** (if yes which club) \_\_\_\_\_

#### IMPORTANT

If the applicant is under the age of twenty one years, proof of the applicant's age must accompany this application. **ie:** Proof of Age Card, current Passport and/or other I.D. with photograph, date of birth and signature signed and with a copy attached to the application.

#### MEMBERSHIP

1year **\$11**

or

3 year **\$25**

#### Member Mail Distribution Preference

(If not completed your record will show Annual Report to receive via website & Renewal Notice, Newsletters & Promotions to receive via post)

I would like to receive my Club information via: **Please tick box**

	Do not send	via email	via post	via website
Annual Report			<input type="checkbox"/>	<input type="checkbox"/>
Newsletter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Promotions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**SIGNATURE OF APPLICANT** \_\_\_\_\_ Date \_\_\_\_\_

I have been a member for at least six months and propose \_\_\_\_\_

Who has been known to me for \_\_\_\_\_ years.

Proposer \_\_\_\_\_ Member No \_\_\_\_\_ Signature \_\_\_\_\_

I have been a member for at least six months and propose \_\_\_\_\_

Who has been known to me for \_\_\_\_\_ years.

Seconder \_\_\_\_\_ Member No \_\_\_\_\_ Signature \_\_\_\_\_

FEES ARE TO ACCOMPANY THE APPLICATION : Unsuccessful applicants will be refunded.

NOTE: - Subscription renewals, inclusive of GST are payable by 30th June each year.

#### OFFICE USE ONLY

Receipt No. \_\_\_\_\_ Joining Sub / Branch YES / NO Paid \_\_\_\_\_