

CHESTER HILL RSL AND BOWLING CLUB CO-OP LIMITED

APPLICATION FOR MEMBERSHIP

NAME _____

ADDRESS _____

_____ **POST CODE** _____

DATE OF BIRTH _____ **JOB TITLE** _____

HOME PHONE _____ **MOBILE PHONE** _____

WORK PHONE _____ **EMAIL ADDRESS** _____

NEXT OF KIN _____ **NEXT OF KIN PHONE** _____

I request you to enter my name on the register of members as a Sub Branch (Ordinary) or Social Member, and I agree to be bound by your Constitution Rules and By-Laws and by any Rules, Regulations of BY-Laws of the Club from time to time in force.

I state that I have not been refused membership of any Club where I have so applied. I fully understand that I will become a Provisional Member on the lodging of this application and I fully understand that the Board of Directors reserve the right to rescind membership if this is deemed to be applicable.

Notice given that the periodic fees that are applicable and which you will be required to pay are SUB BRANCH (ORDINARY MEMBER) \$2, SOCIAL MEMBER \$5, FIVE YEAR SOCIAL MEMBER \$20. These fees are subject for review from time to time.

The Club is subject to the provisions of the Privacy Act 1988. The personal information provided by you on this application and attached documents will be used to process your membership application. Failure to provide all of the requested information may result in your application being rejected. You have a right to access and correct any of your personal information that the Club holds about you.

The Club does not usually disclose your personal information to any other organization or person unless there is a legal requirement to do so. The Club may disclose your information to third parties that provide services under contract to the Club. These contracts require the third party to keep your personal information confidential and secure.

Your personal information, including information about you obtained as a result of you placing your membership card in a gaming or other club machine (not ATM's), may be used by the Club for marketing purposes to improve our services and to provide you with the latest information about those services and any new related services and promotions.

Do you wish to receive marketing material and information about our promotions and services. YES / NO

DATE this _____ day of _____ 20____

SIGNATURE OF APPLICATION _____

1 YEAR SOCIAL - \$5

MEMBERSHIP NUMBER _____

5 YEAR SOCIAL- \$20

DATE PAID _____

ENTERED INTO COMPUTER BY _____

IDENTIFICATION TYPE _____ **ID NUMBER** _____ (PHOTO ID)