MEMBERSHIP APPLICATION



| 1 Year \$10 2 Years \$12 3 Years \$13 4 Years \$15 5 Years \$20 Seniors \$6.50 1 Year \$5 | | | | | |
|--|---------------|--------------|--|-----------|--|
| PERSONAL DETAILS | | | | | |
| TITLE GIVEN NAMES | | SURNA | SURNAME | | |
| | | | | | |
| GENDER | DATE OF BIRTH | | A member of my immediate family has served in the forces. Please circle: | | |
| M F | | , | YES | NO | |
| CONTACT INFORMATION | | | | | |
| STREET NUMBE | R STREET NAME | | | | |
| SUBURB | | STATE | POS | POST CODE | |
| HOME PHONE | | MOBILE PHONE | | | |
| | | | | | |
| EMAIL ADDRESS: | | | | | |
| ACKNOWLEDGEMENT | | | | | |
| Photo identification is required to validate your application. It is a condition of membership that all members agree to have their photo taken and printed on their card. Greenbank RSL is committed to protecting the privacy of the personal information supplied by you and will not disclose any information about you for any purpose other than to provide our services and facilities. | | | | | |
| I understand that sometimes Greenbank RSL may contact me via SMS, email, phone or direct mail for marketing purposes or in the instance that I have qualified for a promotion. I understand that I can opt out of receiving | | | | | |
| correspondence at any time. | | | | | |
| | | | | | |
| | | | | | |
| Identification # | | | Sighted by: | | |
| Entered: | Payment: \$_ | Comp | leted: | | |
| | | | | | |