PAPATOETOE & DISTRICT RSA INC. ASSOCIATE MEMBER APPLICATION FORM

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We are now on FACEBOOK!



AFFIX PHOTO HERE

FIRST NAMES (all)
SURNAME
(PLEASE NOTE: Your name and photo will be displayed for member's perusal until approved at the next Executive Meeting following your application).
ADDRESS
DATE OF APPLICATION Date of birth Occupation
EMAIL ADDRESS
CONTACT PHONE Nos
HAVE YOU BEEN A MEMBER OF ANOTHER CLUB? YES/ NO. IF SO, WHICH CLUB?
HAVE YOU EVER BEEN EXPELLED SUSPENDED OR REFUSED MEMBERSHIP FROM ANY OTHER CLUB? YES / NO
IF YES, WHICH CLUB?
APPLICANTS SIGNATURE
NEXT OF KIN (NAME AND PHONE NUMBER)

YOUR SUBSCRIPTION FEE OF \$50.00 WILL BE DUE ON APPLICATION.

Privacy Act 1993

The Papatoetoe & District RSA is collecting and will hold information on this form. The information is required so:

- 1. Members can assess the applicant's suitability for membership
- 2. Can administer its operation and assist other clubs affiliated within Clubs New Zealand.

The applicant acknowledges that by signing this form he/she has authorised the Papatoetoe & District RSA to obtain, check and/or exchange information with its members or Club New Zealand representatives. The applicant is entitled under the Privacy Act 1993 to have access to and/or request correction of personal information held by Papatoetoe & District RSA about the applicant.

All applicants must be NZ Citizens or have obtained permanent residency and proof may be requested.

For Office Use only			
Identification sighted: Passport/Driver's Licence	Number	Staff:	
Application presented at Committee Meeting	Date		
Application approved / declined	Date	-	
Fees Received (EFTPOS/CASH/ONLINE)	Date	Amount:	AND THE RESERVE
Membership # Allocated	Number		
Membership details entered on computer	Yes / No		