



APPLICATION FOR MEMBERSHIP

Application of Title: _____
First Name in Block Letters Second Name Block Letters

Private Address: _____ Postcode: _____

Telephone: _____ Date of Birth: _____

Occupation: _____ Religion (optional): _____

Email Address: _____

Proposer's Name: _____ M/ship No: _____

Seconder's Name: _____ M/ship No: _____

Five Year Membership \$11

One year Membership \$3

PRIVACY STATEMENT

The Ashfield Catholic and Community Club is subject to the provisions of the Privacy Act 1988. The personal information provided on this application will be used to process your membership application. Failure to provide all necessary information will result in your application being rejected. The Club does not usually disclose your personal information to any other organisation or person unless there is a legal requirement to do so.

Your personal information may be used by the club for marketing purposes to improve our service and to provide you with the latest information about those services and any new services and promotions

Do you wish to receive marketing material and information about our promotions and services?

Yes No

I, the undersigned, am over the age of 18 years, and I agree, if accepted as a member, to abide by the Rules, Regulations and By-Laws of the Club.

Date: _____ Signature: _____

OFFICE USE ONLY

ID Type: _____	ID Number : _____
MemberNumber: _____	Receipt Number: _____
Staff Number: _____	Satff Signature: _____

Ashfield Catholic and Community Club Ltd