



# Club Southland

INCORPORATED



## Application for Membership

Membership Subscription fee of \$40.00 to be paid with application

Please fill in application in block letters

SURNAME MR/MRS/MS/MISS \_\_\_\_\_

FIRST NAMES \_\_\_\_\_

NAME YOU WISH TO BE KNOWN BY \_\_\_\_\_

ADDRESS(including suburb) \_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

EMAIL \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ OCCUPATION \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you ever been refused membership to or expelled from any other Club? YES/NO

If yes give reason \_\_\_\_\_

### PROPOSER AND SECONDER

Proposer Name \_\_\_\_\_ Signature \_\_\_\_\_ # \_\_\_\_\_

Secunder Name \_\_\_\_\_ Signature \_\_\_\_\_ # \_\_\_\_\_

In accordance with Rule 5b of the association's rules, both the proposer and seconder must themselves be a financial member of Club Southland Inc. and have been so for a period of at least one year.

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT. IF GRANTED MEMBERSHIP I AGREE TO BE BOUND BY THE RULES OF THE ASSOCIATION.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Office use only

Date Applications Received \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Application Granted \_\_\_\_/\_\_\_\_/\_\_\_\_

Membership Number \_\_\_\_\_ Fee Received \$ \_\_\_\_\_ **June 2020**