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| <b>1 YEAR</b><br>(2018)<br><b>\$5.50</b> | <b>3 YEARS</b><br>(2020)<br><b>\$12.00</b> | <b>5 YEARS</b><br>(2022)<br><b>\$15.00</b> |
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**MEMBERSHIP NUMBER**

**SOCIAL MEMBERSHIP:**

Title: MR / MRS / MISS / MS / DR

Given Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_

Drivers License Number: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Suburb: \_\_\_\_\_

Post Code: \_\_\_\_\_

Postal Address:  As Above, If Different: \_\_\_\_\_

Suburb: \_\_\_\_\_

Post Code: \_\_\_\_\_

Home Phone:   -

Mobile:

Email Address: \_\_\_\_\_

☺ 'LIKE' REDLANDS RSL on Facebook to receive notifications on membership renewal, promotions, specials, etc.

**APPLICANT DECLARATION:**

I hereby certify that I am over 18 years of age. I will agree to uphold the Constitution of the League and its By-Laws and faithfully observe all rules of the Redlands RSL

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**PRIVACY CODE:** Redlands RSL and Stradbroke RSL are committed to the privacy of your personal information as supplied on this application form. The club will only use your personal details for marketing purposes through a third party, for reasons of newsletters, renewal notices and any extra offers from the Club. Please amend any information at any time by contacting reception staff.

[ ] Please tick if you do not wish to receive any marketing information from Redlands RSL including membership renewal minders

*This Membership is for REDLANDS RSL and STRADBROKE RSL*

**CLUB MEMBERSHIP** (Non League Member) - Copy of documentation MUST be attached!

Relationship to Service Person: \_\_\_\_\_ Are they a member of Redlands RSL: YES / NO, Mem # \_\_\_\_\_

To be eligible for CLUB membership, you MUST be a family member of a serviceman who has served or is serving in the Australian Armed Forces (whether living or deceased). You must not be eligible to be a Service Member of the league.

**OFFICE USE ONLY:**



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|--------------------------|-------------------------|
| Date Paid:               | Rec # or Staff Initial: |
| Accepted Reporting Date: | President Signature:    |

