SWIPE YOUR CARD TO RECEIVE YOUR VOUCHERS



MEMBERSHIP APPLICATION

I hereby apply for election as a member of The Epping Club. I declare that I am over the age of 18 years and if elected, agree to abide by the Rules and By-Laws of the Club. I understand that:

- a) Full annual membership subscription for the current financial year is due upon joining.
- b) Membership subscriptions fall due each year on 1 July and are payable in advance from 1 June.
- c) A member becomes unfinancial after 31 July.
- d) Memberships are not refundable or transferable

YOUR DETAILS:

Title (circle) Mr Mrs Miss Ms Dr Prof Other____

Surname:____

Given Names: _____

DOB: _____Gender: _____

Occupation/Industry:_____

_____ P/c:

MAILING (if different):

Address:_____

P/c:_____

Phone No. (H):_____

Phone No. (Mob):_____

Email:

Preferred language

 \Box English $\ \Box$ Chinese $\ \Box$ Korean

YOUR MEMBERSHIP:

Membership Type	5 Year	3 Year	1 Year	
FULL	□\$40.00	□ \$25.00	□\$10.00	
AGED PENSION	□ \$22.00	□ \$13.75	□ \$5.50	
RSL (sub-branch only)	□\$11.00	□ \$6.60	□ \$2.20	
Method of Payment:				
	E DEFTPO	S CREDI	Г	

LETTING YOU KNOW WHAT'S ON:

- I wish to receive "Notice of meetings" (eg. Annual General Meeting) via electronic means.
 Preferred method:
 Email
 Website (SMS notification where possible)
- □ I wish to receive Information on Prizes, Gifts and Promotional material

INTERESTS:

□ Restaurant promotions□ Sporting events□ Raffles & giveaways

Signature of Candidate:	
E Plus points expire annually.	

OFFICE USE ONLY

New member no:_____

Staff referral:

 Identification Checked

 □ Drivers licence
 □ Aged pension card

 □ Sub-branch (RSL)
 □ Passport
 □ Other (details)

Proposer:	Member No:
Seconder:	Member No:
Officer's Signature:	
Print Name:	Date:

The Epping Club is committed to protecting the privacy of its Members & Guests. Details of the Clubs Privacy Policy are available on request.

