

MEMBERSHIP APPLICATION



PERSONAL DETAILS

Title: Mr Mrs Ms Miss (Circle one)

First Name: _____

Last Name: _____

Date of Birth: _____

Club Number (If Applicable): _____

Address: _____

Suburb: _____

Town/ City: _____

Post Code: _____

Occupation: _____

Company: _____

Contact Number: _____

Email Address: _____

SUBSCRIPTION OPTIONS

Please specify which membership option you would like to join.

Adult Membership Tier 1

\$60 per year

Adult Membership Tier 2

\$50 per year

Joint Membership Tier 1

\$55 per person, per year

Joint Membership Tier 2

\$45 per person, per year

Superannuates Membership Tier 1

\$50 per year

Superannuates Membership Tier 2

\$40 per year

Junior Membership

\$15 per year

Nomination Fee

\$15 for new members

Member Referrals

\$5 membership points



RETURNED AND SERVICES ASSOCIATION



Those wishing to apply for RSA membership please complete this section.

Returned / Service / Member (Please circle your application category)

Optional affiliation to one of our Sub Branch's — Havelock - Renwick - Awatere (Please circle)

Service Number: _____ Unit: _____

Force: _____ Rank: _____

Date of Enlistment: _____ Date of Discharge: _____

I Served in NZ only: Yes No, I served in: _____

Please give detailed overseas service, which will be recorded. Returned membership is for service in an area of conflict or for peace keeping recognized by the award of a medal. NOTE; Proof of Service must accompany this application, if unable to locate, Write to : - Personnel Enquiries, NZ Defence Force, Trentham Camp, Private Bag 905 Upper Hutt I also acknowledge that the RNZRSA APP containing my membership card and login will be made available to me.

PRIVACY STATEMENT

The Clubs of Marlborough is collecting and will hold the information on this form. This information is required so that the Club and its members can assess the applicant's suitability for membership (including transfer of membership) and so it can administer its operation and assist other clubs affiliated to Clubs New Zealand to administer theirs.

The applicant acknowledges that by signing this form he or she has authorized the club to obtain, check, exchange information with, and supply information to members of the Club, Clubs New Zealand, and clubs that are affiliated to Clubs New Zealand. The applicant is entitled, under the Privacy Act 1993, to have access to, and request correction of, personal information held by the Club about the applicant.

I hereby agree to abide by the rules of the Club and certify that the information provided on this application form is correct. I acknowledge that if I have given any false information, it could result in automatic cancellation on my application and/or membership of the Club.

I acknowledge that I have read the Privacy Act statement above and acknowledge that the Club will make enquiries into my suitability as a member and should my application for membership of the Club be refused, the Club is not required to supply a reason for that refusal.

Signed: _____ Date: _____

Are the Clubs of Marlborough allowed to send you any news related to our special offerings and events?

No Yes (Please indicate)

FOR OFFICE USE ONLY

NZ Driver's License 18+ Card Passport
Number: _____ Number: _____ Number: _____

MRSA SECRETARY TO COMPLETE

Date Received: _____ Executive Meeting Decision: Accepted / Not Accepted

Letter of acceptance sent: _____ Badge Issued: Yes / No

RNZRSA loaded as new member: _____ Detailed added to Belong: _____

Subbranch Added: _____ Card Ordered: _____

OFFICE TO COMPLETE

Date Received: _____ Payment Received: \$ _____

Method of Payment: Cash / EFTPOS (Please indicate) Membership Number: _____

Insight MMPROX Number: _____ MailChimp: _____

BANKING DETAILS

Subscriptions may be paid to the following account:

Bank: ANZ

Bank Account Number: 01-0598-00083567-001

Company Name: BWMC t/a Clubs of Marlborough

Reference: Name and Membership Number