

Point Chevalier Memorial RSA (Inc)

Membership Application / Renewal Form

Welcome! Anyone can join our Club. All you have to do is fill in this form, pay your subscription and we take care of the rest. We pride ourselves on providing our members and guests with excellent customer service and we welcome you to join us.

Membership Options:

RSA Club Bank A/C (ASB Bank 12-3020-0427523-00)

Returned Member - \$15 <input type="checkbox"/> Has served in a theatre of war, for New Zealand or another commonwealth country or for the United Nations. Returned Members over 75 years - FREE *Proof of Service must be shown.	Service Member - \$25 <input type="checkbox"/> Has served in the armed or defence force of NZ or commonwealth or any country that has not taken up arms against NZ or our allies, or a police officer or an officer in the cadet force or has served a minimum of three years as a cadet. *Proof of Service must be shown	Associate Member - \$35 <input type="checkbox"/> Is either a New Zealand citizen, a permanent resident or a citizen of another commonwealth country whom has attained the age of 18 years.
Family Member - \$60 <input type="checkbox"/> Parents / Caregivers x 2 plus children. Are either a New Zealand citizen, a permanent resident or a citizen of another commonwealth country whom has attained the age of 18 years. Plus free Kids Club membership	Corporate Member <input type="checkbox"/> Talk to our team if you are a business, club or association and would like to become a Corporate Member.	Youth Member - \$10 <input type="checkbox"/> Has attained the age of 13 and has not yet reached 18 years and is either a New Zealand citizen, a permanent resident or a citizen of another commonwealth country.

Applicant Details New: Renewal: Membership # _____

First Name/s: _____ Last Name: _____

Prefer to be known as: _____ Birthdate: _____

Address: _____

Suburb: _____ City: _____ Post Code: _____

Email: _____ Occupation: _____

Phone: (Hm) _____ (Bus) _____ (Mob) _____

Service Number: _____ Rank: _____

Enlisted: _____ Discharged: _____

Regiment / Battalion/Unit: _____

PRIVACY ACT 1993 Point Chevalier Memorial RSA (Inc) maintains records relating to its members to assist in promotion and administration of the affairs of the Club. The information is used, in particular to provide a means of communication with the members and guests. If you have any objections to any information about yourself being used for any stated purpose, you should notify the Club in writing within 7 days of the date of your membership acceptance. In the absence of any notice of objection, you will be deemed to consent to the Clun using the personal information about your for the purposes stated above

Have you been refused or had your membership revoked from any other Club? YES / NO

If yes, name of Club and details _____

I/ we hereby agree to abide by the rules of the Association and certify that the information provided is correct

Signature of Applicant(s): _____ Date: _____

Nominee (current member): _____ # _____ Seconder: _____ # _____

Office Use Only

<input type="checkbox"/> Paid \$ _____ Date _____	<input type="checkbox"/> Proof of Service	<input type="checkbox"/> Entered Card DB
<input type="checkbox"/> Entered QB Member DB	<input type="checkbox"/> Invoiced	<input type="checkbox"/>
<input type="checkbox"/> Entered MC Newsletter DB	<input type="checkbox"/> Membership Approved	<input type="checkbox"/>