

DATE _____

PAYMENT METHOD

CASH/CARD



Erina Rugby League Football Club
18 Ilya Avenue, Erina NSW 2250
02 4365 2233

MEMBERSHIP APPLICATION

Ordinary Membership \$11.00 – (Direct involvement with Erina Rugby League Football Teams required to be eligible for Ordinary membership)

Please tick appropriate box - Player Coach Football Admin Erina Juniors
Other (please specify) _____

Sporting Membership - Players or officials of any sporting activity (other than the game of Rugby League Football) which is organised and/ or sponsored through the Club or supporters of any of the sporting activity

- 1 Year \$5.50
- 3 Years \$14.00
- 5 Years \$22.00

Associate Membership

- 1 Year \$5.50
- 3 Years \$14.00
- 5 Years \$22.00

To the Directors, I hereby apply for Club membership of Erina Rugby League Football Club Limited. I declare I have attained the age of 18 years, and if admitted to membership agree to abide by the Club's Constitution and By-laws as adopted by Erina Rugby League Football Club Limited.

Please Note: The Registered Club's Act 1976 requires the Club to obtain information including your name, address and occupation, and to display your name in the club's premises for no less than 7 days after we receive your application. If you do not provide that information, we may be unable to consider your application for membership.

PHOTO IDENTIFICATION REQUIRED. (PLEASE USE BLOCK LETTERS)

SURNAME _____

FIRST NAME _____ TITLE _____

RESIDENTIAL ADDRESS _____

SUBURB _____ POSTCODE _____

MAILING ADDRESS _____

PHONE _____ MOBILE _____ DOB _____

OCCUPATION _____ EMAIL ADDRESS _____

SIGNATURE _____

DRIVERS LICENCE, PASSPORT OR RTA PHOTO ID NUMBER _____

OTHER ID _____

OFFICE USE ONLY: DATE RECEIVED...../...../..... RECEIPT NO.

MEMBERSHIP NO. STAFF MEMBER ACCEPTING APPLICATION.....