



GORE DISTRICT MEMORIAL RSA INC.

P O Box 333 Gore

Phone (03) 208-6218

YOUTH MEMBER APPLICATION **(Aged 13 to 18 years Only)**

Annual Fee

\$15.00

Payable on Application

I HEREBY make application to join the GORE DISTRICT MEMORIAL RSA as a **YOUTH** member.

Date.....

FULL NAME.....**Title: Mr/Mrs/Miss/Ms**
(PLEASE WRITE NEATLY TO AVOID INCORRECT NAMES ON CARD)

Your preferred Christian Name which will appear on your membership card

Date of Birth..... **OCCUPATION**.....

Postal Address:.....

Home Phone No. () Work Phone No. () Mobile No.....

Email Address:

Privacy Act 1993:

The above named club is collecting and will hold the information on this form. The Club is collecting the information: -

1. so it and its members can assess the applicant's suitability for membership (including transfers of membership),
2. so it can administer its operation and assist other clubs that are members of New Zealand Chartered Clubs Incorporated (NZCC) to administer theirs,
3. to enable NZCC or its agent to compile a list of members of all clubs in New Zealand and to send those members promotional marketing and other material,

The applicant acknowledges by signing this form that he or she has authorised the club to obtain, check, exchange information with and supply information to members of the club, NZCC and other clubs that are members of NZCC.

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.

In joining this Association, I undertake to abide by its Constitution and Rules, and I hereby declare I am not already a member and have not been expelled or rejected from membership of any Club or RSA in NZ.

APPLICANT'S SIGNATURE:

Date.....

PROPOSERS: **YOU MUST HAVE BEEN A MEMBER OF THE GORE DISTRICT MEMORIAL RSA FOR A PERIOD OF NO LESS THAN 12 MONTHS TO BE ELIGIBLE TO NOMINATE THE APPLICANT FOR MEMBERSHIP.**

Proposed by:

Name:.....
(Please Print)

Membership No:

Signature:

Name:.....
(Please Print)

Membership No:

Signature:

ONCE YOUR APPLICATION FOR MEMBERSHIP HAS BEEN APPROVED YOU WILL BE NOTIFIED BY EMAIL OR PHONE TO PICK UP YOUR CARD AND WELCOME BOOKLET AT THE BAR OR WE CAN SEND IT TO YOU.