

# Community Membership Application

Discover the benefits of being a member - it's so easy to join!

ASPLEY ATHLETICS CENTRE INC

Simply complete this application form and return to the Member Services Office or mail with cheque to: **Membership Department**  
Kedron-Wavell Services Club Inc,  
PO Box 107, Chermiside South Old 4032

FULL NAME OF APPLICANT (BLOCK LETTERS PLEASE)

Surname	Given names	Title
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Current address

Phone (Optional)	Mobile (Optional)
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Date of birth (Optional)

Payment method  Cash  Cheque  Credit Card Card Type  Visa  Mastercard  Bankcard  Amex

Card number Expiry

Card holder name Signature

I solemnly declare that the statements made in this application are to the best of my knowledge true and accurate in every particular. I hereby make an application to join Kedron-Wavell Services Club Inc. The sum of \$10.50 is tendered herewith, being my subscription fee for this present calendar year. I understand renewal of said subscription is due at 31st December each year

Signature of Proposer' Membership No: .....

Signature of Seconder' Membership No: .....

\*Must 1.? Life or Financial Ordinary

- New 2 Year Membership \$20.00 inc. GST
- Please tick if you do not wish to be placed on the clubs mailing list to receive any further promotional offers.
- Please tick if you would like to receive a membership form to join Shawspartz Ltd.

## OFFUSE ONLY

Date of Application: .....

Staff Signature: .....

Receipt No: .....

Membership No: .....

Amount Paid .....

