



A.B.N 49 001 058 180 P.O. BOX 42, DARETON, N.S.W., 2717  
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## APPLICATION FOR MEMBERSHIP

I hereby apply to become a Member of the Coomealla Memorial Sporting Club Limited

Mr/Mrs/Ms/Miss \_\_\_\_\_ Christian Name/s \_\_\_\_\_  
 \_\_\_\_\_ Surname \_\_\_\_\_  
 Residential Address \_\_\_\_\_  
 \_\_\_\_\_ Post Code \_\_\_\_\_  
 Postal Address \_\_\_\_\_  
 \_\_\_\_\_ Post Code \_\_\_\_\_  
 Occupation \_\_\_\_\_ Date Of Birth \_\_\_\_\_  
 Home Tel \_\_\_\_\_ Business Tel \_\_\_\_\_  
 Mobile \_\_\_\_\_ E-mail \_\_\_\_\_

I declare that I am over 18 years of age and request that you enter my name on the register of members accordingly.  
 I agree to be bound by the Constitution and By-Laws of the Coomealla Memorial Sporting Club Limited.  
 I understand that my current financial membership is valid until the 30th September 2011

Signature \_\_\_\_\_ Date \_\_\_\_\_

### ANNUAL REPORT :

Do you require the Coomealla Club to provide you with a Annual Report? Yes  No

### PROMOTIONAL MATERIAL:

I hereby authorise the Club to provide me with Club and associated promotional material, this may include postal, e-mail and SMS material.

E-mail: \_\_\_\_\_ Yes  No

### PERSONAL IDENTIFICATION

The Coomealla Memorial Sporting Club Limited requires one form of identification when producing this membership application to copy and attach to application form.

The required forms of identification include:

**Motor Vehicle Drivers Licence,  
 Passport or Personal Identification Card.** ➡

### FOR OFFICE USE ONLY

Approved At Board Meeting	Date Paid _____
Signature _____	Receipt Number _____
Date _____	Accepted By _____
Subscription <u>    \$11.00    </u>	Membership Number _____

Membership Application Form expires 12th July 2012