



# INDIVIDUAL MEMBERSHIP APPLICATION

(Please Print Clearly)

<b>Name:</b>	<input type="text"/> (first name) <input type="text"/> (middle name) <input type="text"/> (last name)	<b>Date of Birth:</b>	<input type="text"/>
<b>Address:</b>	<input style="width: 100%;" type="text"/>		
<b>Telephone:</b>	<input type="text"/>	<b>Mobile:</b>	<input type="text"/>
<b>Email:</b>	<input style="width: 100%;" type="text"/>		
<b>Membership Type Requested:</b>	<input type="text"/>	<b>Subscription Level:</b>	<input type="text"/> Gold or Platinum (below for details)
<b>Applicant Signature:</b>	<input style="width: 100%;" type="text"/>		<b>Date:</b>
<b>Spouse / Partner:</b>	<b>Name:</b>	<input style="width: 100%;" type="text"/>	
		(first name)	(last name)
<b>Nominated By:</b>	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>
	(name)		(signature)
<b>Membership Type:</b>	<b>Annual Subscription Level (Tick applicable box - √):</b>		
	<b>Gold:</b>		<b>Platinum:</b>
Community Member	\$60.00	<input type="checkbox"/>	\$100.00
Returned or Service Member	\$40.00	<input type="checkbox"/>	\$60.00
Youth Member	No Fee	<input type="checkbox"/>	N/A
<b>Personal Data Use:</b>	<b>Accept</b>		<b>Not Accept</b>
(refer privacy statement below)	(circle preferred option)		

Office Use Only:											
Proof of Service:	<input type="checkbox"/>	News Letter:	<input type="checkbox"/>	Bepoz:	<input type="checkbox"/>	Xero:	<input type="checkbox"/>	Card Ordered:	<input type="checkbox"/>	Card No.	<input type="text"/>
<b>Payment Method:</b>	Bank Transfer	<input type="checkbox"/>	EFTPOS	<input type="checkbox"/>	Cash	<input type="checkbox"/>					

<b>Service Outline:</b> (if applicable)	<b>Service:</b>		<b>Service Number:</b>	
	<b>Corps / Branch:</b>			
	<b>Enlistment Date:</b>		<b>Discharge Date:</b>	

### Privacy Statement

The personal data entered on this form is protected in accordance with the Privacy Act 2020. The Warkworth RSA uses the data to support the promotion and administration of the affairs of the association. In particular, the information entered on the form is used for communication to the membership on all association and sponsor activities.

If any member does not wish their data to be used for such purposes, they should choose 'Not Accept' on the previous page. In the absence of any such choice, the member will be deemed to consent to the association using their data for the purposes stated.

### Submitting Your Application

This form may be submitted to the Warkworth RSA by either:

- a. Handing the completed and signed form to any staff member at reception or behind the bar.
- b. Scanning the completed and signed form and emailing it to [office@warkworthrsa.co.nz](mailto:office@warkworthrsa.co.nz) or [manager@warkworthrsa.co.nz](mailto:manager@warkworthrsa.co.nz)

NOTE 1: The relevant subscription fee must be paid when submitting this application form, either directly at the RSA or via an electronic transfer to the RSA account (ANZ 01 0482-0009613 00).

NOTE 2: Membership types and eligibility criteria are outlined in the accompanying information pack.

NOTE 3: By applying for membership, the applicant agrees to adhere to the Rules of the Warkworth RSA and any subsequent amendments, as approved from time to time by the Executive Committee, if membership is approved.

NOTE 4: Enquiries about joining the WWRSA Women's Section may be made to the Secretary / Manager or bar staff once this application form has been processed.