



MEMBERSHIP APPLICATION FORM

(ALL QUESTIONS ON THIS FORM MUST BE COMPLETED)

Type of Membership requested: Please indicate:

FULL (with voting rights) \$50.00 (inc gst)

or

ASSOCIATE (Social-no voting rights) \$40.00 (incl gst)

SURNAME _____ FIRST NAME _____

ADDRESS _____

SUBURB _____ POST CODE _____

PHONE (hm) _____ PHONE (Mobile) _____

D.O.B _____ Please indicate: MALE / FEMALE

EMAIL _____ OCCUPATION _____

I hereby apply for Membership of the Navy Club Incorporated
I will abide by all the Rules & Regulations of the Navy Club Incorporated
I understand that my application is subject to review by members and will be placed on the Club Notice Board for a period of 28 days prior to consideration by the Club Committee of Management.

Date ____ / ____ / ____ Signature _____

PROPOSER: _____ **MEMBERSHIP NUMBER:** _____
(Signature of Financial Full/Life Member of Navy Club Inco.) (Must be listed)

SECONDER: _____ **MEMBERSHIP NUMBER:** _____
(Signature of Financial Full/Life Member of Navy Club Inc.) (Must be listed)

Office use only:

Amount Received: \$ _____ Receipt Number: _____ Date: _____

Committee of Management review date _____

Membership Card Number Issued: _____