



# Application for Membership

Please complete all details below

Title    Mr    Mrs    Miss    Ms   Other .....

Surname .....

First Name .....

Address .....

Suburb ..... State ..... Postcode .....

Home Telephone .....

Mobile Telephone .....

Work Telephone .....

Email Address

**(PLEASE PRINT EMAIL ADDRESS IN BOX PROVIDED ABOVE)**

Date of Birth ...../...../.....

Occupation .....

Please indicate your preferred membership by ticking one of the boxes below;

Club Membership 1 year                      \$8.00

**Please nominate the Kiama Leagues Club sponsored club group e.g. Rugby League, AFL, Cricket, Darts, Hockey, Soccer, etc.**

Club Membership 3 years                      \$20.00

Pensioner Club Membership 1 year \$4.00

Pensioner Club Membership 3 year \$10.00

I hereby apply for Club Membership of Kiama Leagues Club Limited.

I declare that I have attained the age of 18 years and, if admitted to membership, agree to abide by the Club's Constitution and By-Laws as adopted by Kiama Leagues Club Limited.

**P.T.O. (PLEASE TURN OVER)**

**Privacy Policy**

Kiama Leagues Club is subject to the provisions of the Privacy Act 1988. The personal information provided by you on this membership application form will be used to process your membership application. You have the right to access and correct any of the personal information that Kiama Leagues Club holds about you. We will deal with your personal information, including information obtained as a result of placing or swiping your membership card in any electronic card reading device (not ATM's), in accordance with our privacy policy, which is available on request. In particular, we may use your personal information to advise you of Club services, benefits or offers. Please let us know if you would prefer not to be contacted with such information by ticking this box

**Please Note:** For Kiama Leagues Club to consider your application for membership, it is a requirement of Section 31 of the Registered Clubs Act 1976 that we obtain, display in the Club and in some cases make available information such as your name and address. If you do not provide that information we may be unable to consider your application.

Signature of Applicant .....Date .....

**PROOF OF IDENTIFICATION MUST BE SHOWN IN PERSON WHEN MAKING AN APPLICATION FOR MEMBERSHIP.**

**PLEASE ANSWER THE FOLLOWING THREE (3) QUESTIONS**

**NOTE: The Annual Report is available to view or download on our website [www.kiamaleagues.com.au](http://www.kiamaleagues.com.au)**

Do you wish to receive a copy of our Annual Report?  Yes via email  No  
 Yes Hard Copy via Post

What is your preferred method of contact?

Mail  Email  Telephone

Please tick if you wish to be removed from receiving club newsletter

**Member Reward Account**

All members who join the club automatically have a member reward account opened through the club's reward scheme in their name. Your membership card is your member reward account card. The card can be used to earn reward points when you make purchases in the club's bar and bistro. It can also be used to earn reward points when you play the gaming machines in the club. You can also deposit money into your member reward account, through club reception, and hold these funds in credit to be used for future club purchases at the bar and bistro. You may elect not to use your member reward account and the choice is entirely voluntary, at the member's discretion.

The security of money in your member reward account is the responsibility of both the registered club and the account holder. The government and its agencies take no responsibility for any losses that might occur from the account. An account holder is solely responsible for ensuring that the account holder's personal identification number ('PIN') is kept confidential and that no other person has access to the account holder's member reward card. The account holder is liable for any losses that might arise from, or in connection with, the account holder's failure to comply with such responsibilities.

**Think! About Your Choices. Call Gambling Help 1800 858 858. [www.gamblinghelp.nsw.gov.au](http://www.gamblinghelp.nsw.gov.au)**

**Office Use Only**

<b>Date</b>		<b>Amount Paid</b>		<b>ID Type &amp; No.</b>	
<b>Receipt No.</b>		<b>Board Meeting</b>		<b>M/Ship No.</b>	