

......

Leeton Soldiers Club Cnr Yanco & Acacia Avenue, PO Box 727, Leeton NSW 2705 02 6953 3444 | www.leetonsoldiers.com.au

JUNIOR SPORTING MEMBERSHIP APPLICATION

Surname		
Given Name	Preferred Name	
Residential Address		
Postal Address		
Date of Birth	Occupation	
Phone (Home)	(Business)	.(Mobile)
Email Address		

Applicants must supply a photo ID (ie: Drivers Licence, Passport or photo card) upon request

I hereby certify that I am a member of(sporting body) which is affiliated with the Leeton Soldiers Club Pty Ltd. Membership Fee \$2.50					
Signature	Date				
We, as parent(s) / guardian(s) hereby support the above ap	oplication				
Print Name	Signature				
Print Name	2				
We hereby certify that(sporting body)					
Name of President M	lembership # Signature				
Name of SecretaryMe	embership # Signature				

PRIVACY STATEMENT

The Leeton Soldiers Club is subject to the provisions of the Privacy Act 1988. The personal information provided by you on this form / application will be used to process your membership application. Failure to provide all of the requested information may result in your application being rejected. You have the right to access and correct any of your personal information that the club holds about you. The club does not usually disclose your personal information to any other organisation or person unless there is a legal re-quirement to do so. The club may disclose your information to third parties that provide services under contract to the club. These contracts require the third party to keep your personal information confidential and secure. Your personal information, including information about you obtained as a result of you placing your membership card in a gaming or other club machine (not ATM's), may be used by the Club for marketing purposes to improve our services and to provide you with the latest information about those services and any new related services and promotions.

NO 🗌

Do you wish to receive information about our promotions and services	s? YES 🗌
Signature	Date

2	Date

FOR OFFICE USE ONLY

Membership No			
Employee's name		. Date	
Amount Paid		. Receipt	
Applicants ID checked	Driver's Licence #	Passport #	Other