



## MEMBER APPLICATION

**The Whangarei RSA welcomes all prospective members. Our membership is open to anyone over the age of 18 – there are no restrictions as to who can join.**

**All applicants please complete the following:**

Name: (Mr. Mrs. Ms. Miss) \_\_\_\_\_  
(Surname)

...Date of Birth: \_\_\_\_\_  
(Christian Names)

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Occupation: \_\_\_\_\_

**ALL SERVICE PERSONNEL** - please provide verification of service i.e., pay book, discharge papers or other certificate of service-Id papers and fill in the following. **I hereby authorise the Whangarei RSA to obtain proof of service.**

**SERVICE NO** \_\_\_\_\_ **UNIT/SHIP** \_\_\_\_\_

**ALL OTHER APPLICANTS** - Please provide a photo ID; a current copy of a driver's license or passport and have the nomination portion below completed by a financial member of this organisation.

**NOMINATED BY:** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Membership #** \_\_\_\_\_  
(Please Print)

**SECONDED BY:** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Membership #** \_\_\_\_\_  
(Please Print)

### **Declaration**

I hereby apply for membership of the Whangarei Returned Services Association (Inc.) and I agree that if my application is accepted I will abide by all of the Rules of the Whangarei Returned Services Association (Inc.). I declare that I have not been refused membership or expelled by any Ex-Services Association or Chartered Club. I declare that I am not currently facing any **criminal charges**, nor do I have any criminal convictions to which the **CLEAN SLATE ACT** does not apply. **I hereby authorise the Whangarei RSA to obtain a police check to verify this declaration if required.**

I understand that any Membership card or badge issued to me remains the property of the Association and must be returned if I cease to be a member or become unfinancial.

**I have read and understood the above Declaration.**

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Annual Subscription **\$60.00 due 1 July OFFICE USE:** Paid: \$ \_\_\_\_\_ Receipt No: \_\_\_\_\_ Date: \_\_\_\_\_

**Note - Subscriptions rebated quarterly**

Cash / Eftpos