



MEMBERSHIP APPLICATION (PLEASE TICK):

FULL (\$95)

VETERAN (\$45)

TEMPORARY (\$40)

Important: the **APPLICANT** shall attach to this application, the current **ANNUAL FEE**, or pay by Direct Credit 03 1509 0164010 00 using your name as a Reference.
All prices quoted include GST.

APPLICANT (PLEASE PRINT CLEARLY)

SURNAME: _____

CHRISTIAN NAMES: _____

PREFERRED NAME: _____

OCCUPATION: _____

D.O.B.: ____ / ____ / ____

CONTACT NO.: _____

ADDRESS: _____

PREFERRED CONTACT METHOD:

MAIL

EMAIL

EMAIL ADDRESS: _____

(PLEASE PRINT CLEARLY)

IN ACCORDANCE WITH THE RULES, WE RECOMMEND THE APPLICANT/S FOR MEMBERSHIP.

PROPOSER: _____

SIGNED: _____

MEMBER NO.: _____

SECONDER: _____

SIGNED: _____

MEMBER NO.: _____

I AM INTERESTED IN THE FOLLOWING:

SNOOKER

WINE TASTING (WAGS)

DARTS SECTION

TRAVEL CLUB

POKER CLUB

FISHING SECTION

POOL SECTION

GOLF SECTION

QUIZ NIGHTS

PRIVACY

The club is collecting, and will hold the information on this form.

The information is required:

- a. So it, and its members, can access the applicants suitability for membership (including transfer of membership)
- b. So it can administer its operation and assist other clubs affiliated with Clubs NZ to administer theirs.
- c. A copy of this application form will be displayed on the Club notice board for a period of 14 days.

The applicant acknowledges by the signing of this application form that he or she has authorised the Club to obtain, check, exchange and supply information to members of the club, Clubs NZ and clubs that are member clubs of Clubs NZ.

The member is entitled under the privacy act 1993, to have access to, and request the correction of, personal information held by the Bays Club Inc., about the applicant.

I acknowledge that I have read the Privacy Statement above, and acknowledge that the Club will make enquiries into my suitability as a member and should my application for membership be refused, the Club is not required to supply a reason for that refusal.

I hereby agree to abide by the constitution of the Club and certify that the information provided on this form is correct. I acknowledge that if I have given false information, it could result in automatic cancellation of my application and or membership of the Club.

SIGNATURE OF APPLICANT: _____

DATE: ____ / ____ / ____