

# Membership Application

Campbelltown Catholic Club



Campbelltown Catholic Club

**Membership Type**  1 Year (\$8)  3 Years (\$20)  5 Years (\$30)  10 Years (\$50)

Title     First Name

Surname

Home Address

Suburb                      Postcode

Mailing Address

Suburb if different from above                      Postcode

Phone (Home)         (Work)

(Mobile)

Email Address

Date of Birth   /   /      Country of Birth

dd/mm/yyyy

Language/s Spoken at Home         /

Occupation

Are you Catholic?  Yes  No Staff # if a Club Employee

Do you wish to receive general promotional material from the Club?  Yes  No

Do you wish to receive gaming related promotional material from the Club?  Yes  No

Do you wish to receive a copy of the Club's Financial Reports?  Post  Email  No

### Privacy Statement

You can view our full Privacy Policy online or ask Reception for a printed copy.

### Declaration

I, the undersigned, am over the age of 18 years, and I agree, if accepted as a Member to abide by the Rules, Regulations and By-Laws of the Club.

Signature  Date   /   /

dd/mm/yyyy

Membership Proposed by

Member Number       Signature

**Staff Use Only**

ID Type  Driver Licence  Passport  NSW Photo Card  Other

New Member #       Your Staff #     Date   /   /