



MOUNT MAUNGANUI RSA MEMBERSHIP FORM

I wish to apply to join the Mount Maunganui RSA as a **Returned / Service** member and to undertake to abide by the rules and standards of this Association.

SERVICE NO: SURNAME:

INITIALS: TITLE: Dr / Sir / Mr / Mrs / Miss / Ms

CHRISTIAN NAMES:

STREET.....CITY.....POSTCODE.....

E-MAIL ADDRESS (if you would like email)

PHONE: HOME (...) WORK (...)

RANK: WHICH FORCE:

DATE ENLISTED: WHICH WAR:

DATE DISCHARGED: DATE OF BIRTH:/...../

MILITARY UNIT: WHERE SERVED

OCCUPATION (eg Retired):

INTERESTS: (Please tick) Golf, Indoor Bowls, Outdoor Bowls, Fishing, Snooker, 8-Ball, Chess, Walking

TRANSFERRED FROM (if applicable):

PREVIOUS ADDRESS:

DISABILITY: Yes/No % OF DISABILITY: % LAST REVIEWED:

NEXT OF KIN:

PHONE NO: RELATIONSHIP: (eg Daughter)

ADDRESS:

CURRENT WILL: Yes/No WHERE HELD

DO YOU HOLD A CURRENT DRIVERS LICENSE: Yes/No

WAR PENSION: Yes/No NUMBER: Review Newspaper: Yes/No

GENERAL PRACTITIONER:

Proof of Service is required to accompany this application. i.e. Discharge Form, pay book, etc.

I declare that to the best of my knowledge the information provided in this application is accurate and I understand that if any false or misleading information is given, or any material is suppressed I may be refused membership, or if I have been accepted, my membership may be terminated.

Signed:(Applicant) Date: / / 20..... PTO

OFFICE USE ONLY Ret / Ser <60 / <70 / <80 / >80

Receipt No:..... Club No:

Have you ever been refused membership or expelled from any club? YES NO

Have you ever been convicted of any crime? YES NO

Will you allow your name and address to be supplied to RNZRSA and Clubs New Zealand to be included on a national register of members? YES NO

TERMS AND CONDITIONS OF MEMBERSHIP:

I undertake, if elected, to abide by the rules, bylaws, and policies of the Mt Maunganui RSA. The full rules, bylaws, and relevant policies, including the privacy policy are available on request from the club.

I accept that my application for membership is subject to the registered rules of the Mt Maunganui RSA and will be accepted or declined by the Executive Committee. Pending acceptance of my application, I acknowledge that I have the rights and privileges only of a visitor at the discretion of the Executive Committee.

Signed:(Applicant) Date: / / 20.....