

# utshaberfieldclub

## APPLICATION FOR MEMBERSHIP

The Membership Secretary  
UTS Haberfield Club Ltd.  
PO Box 3210  
Broadway NSW 2007

Thank you for your membership application to UTS Haberfield Club, we look forward to seeing you soon.

I hereby apply for membership of UTS Haberfield Club Ltd. If membership is granted, I undertake to be bound by the Constitution and the By-Laws of the Club. I acknowledge that the annual subscription of \$15.00 covers the period from 1 January to 31 December. I understand that if membership is not granted, the fee will be refunded to me. Please indicate if you wish to take a 3 year membership option for \$30.00.

Title: _____	<b>Membership Options:</b>	
Given Name: _____	<input type="checkbox"/> 1 Year \$15.00	<input type="checkbox"/> 3 Years \$30.00
Surname: _____	Home Phone: _____	Email: _____
Residential Address: _____	_____	_____
_____	Mobile: _____	_____
_____	_____	Occupation: _____
Suburb: _____ Postcode: _____	Business: _____	_____
Postal Address (If different from above): _____	Date of Birth: _____	What is your preferred method of communication?
_____	Age: _____	(Please tick appropriate box)
_____		<input type="checkbox"/> Email <input type="checkbox"/> Post <input type="checkbox"/> SMS
Suburb: _____ Postcode: _____		
Signature: _____		Date: _____

<b>PROPOSED BY:</b>	<b>SECONDED BY:</b>
Name: _____	Name: _____
Membership No: _____	Membership No: _____
Signature: _____	Signature: _____

..... **OFFICE USE** .....

<b>OFFICE USE:</b>	DATE OF PAYMENT: _____
MEMBERSHIP GRANTED ON: _____	PAID: <input type="checkbox"/> _____ PROCESSED: <input type="checkbox"/> _____
PROOF OF AGE SIGHTED: <input type="checkbox"/> YES <input type="checkbox"/> NO	CARD RECEIVED: <input type="checkbox"/> CARD POSTED: <input type="checkbox"/>
I.D.: PASSPORT/DRIVERS LICENSE/ OTHER _____	MEMBERSHIP NO: _____
I.D. NO: _____	PROCESSED BY: _____