**APPLICATION FOR WAIHI RSA MEMBERSHIP**

**Renewal Membership 2025-2026**

**Please print clearly, Thank you**

**APPLICANT: TITLE Mr Mrs Miss Ms (Delete what does not apply)**

**FULL NAME …………………………………………………………………………………………….**

**ADDRESS ………………………………………………………………………………………………..**

**DATE OF BIRTH …………………………………...**

**EMAIL……………………………………………………………….**

**PHONE NO……………………………………………………**

**SIGNATURE ……………………………………. DATE………………………………….**

**The subscription is:**

**Service and Returned $20.00**

**Club member $35.00**

**Over 80s $20.00**

 I would like my membership card posted; I have included an additional $5.00 with my membership fee.

(Please ensure your address is correct)

I have not been convicted of any crime within the Crimes Act?

By filling in this form and paying my sub, I consent to become a member of the Waihi RSA and understand, if elected, to abide by the Clubs Constitution, by – laws, and policies. The full constitution, 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 constitution of the Waihi RSA and will be accepted or declined by the Committee.

I understand that my membership will be processed once my payment has cleared.

**Bank Details:**

**Waihi Memorial RSA**

**06-0473-0017240-00**