



MEMBERSHIP APPLICATION

Mr Mrs Miss Ms

1 Year Associate Membership *\$ 5.50
3 Year Associate Membership *\$13.20
20 Year Associate Membership *\$55.00

Surname _____ First name _____

Date of Birth _____

Residential Address _____

Suburb _____ State _____ Post Code _____

Postal Address As Above _____

Suburb _____ State _____ Post Code _____

Ph: H _____ Ph: M _____

Email _____ Receive the Annual Report via email

Occupation _____

Your Club News, Entertainment, Offers and Events

I expressly consent to receiving from The Ary Toukley advertising material relating to food, beverage, entertainment, promotions and gaming (please tick the box to indicate your consent).

I declare that I am 18 years of age or older. I agree if elected to be bound by the Constitution and any Rules, Regulations or By-Laws of the Club.

** New members are not eligible to win the member's draw until approved by the Board.*

To consider your application, the *Corporations Act* and *Registered Clubs Act* require us to obtain, display in the Club and in some cases disclose your personal information provided on this form. If you do not provide the information on this form we may reject your application. The Club will deal with your personal information in accordance with the *Privacy Act* (1988) and the *Australian Privacy Principles*. Your personal information may be disclosed to third parties that contract with the Club or as required or authorised by law, the Club's Constitution or to the Tuggerah Lakes Liquor Accord. In particular the Club may use your personal information to advise you of Club services, benefits or offers. More information including how to access or correct your personal information or complain about the Club's privacy practices is in our Privacy Policy available at www.thearytoukley.com.au or at the Welcome Area of the Club. It is unlikely that your personal information will be disclosed overseas except where provided for under the Privacy Policy.

SIGNATURE OF APPLICANT _____ **DATE** _____

OFFICE USE ONLY

DATE RECEIVED: / / STAFF: _____ MEMBERSHIP NO: _____

ID SIGHTED and DETAILS CONFIRMED : Yes AMOUNT PAID _____

