

## FINLEY RETURNED SOLDIERS CLUB 63-67 TOCUMWAL STREET FINLEY NSW 2713

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## **JUNIOR MEMBERSHIP APPLICATION FORM 2015**

SURNAME	GIVEN NAMES	S
DATE OF BIRTH//		
RESIDENTIAL ADDRESS STREET NO AND NAME		P.O.BOX
SUBURB	STATE	P/CODE
PHONE: HOME	MOBILE	E
EIVIAIL ADDRESS	P.O.BOX	
form/application will be used to proce application being rejected. You have the not disclose your personal information	ss you membership application. Failure to the right to access and correct any of your to any other organization or person unlies that provide services under contract	to provide all of the requested information may result in your or personal information that the club holds about you. The club does nless there is a legal requirement to do so. The club may
We, as parents/guardians/h	erby support the above applic	cation
PRINT NAME		SIGNATURE
PRINT NAME		SIGNATURE
I herby certify that I agree to ab	ide by the Rules and Regulation o	of the Finley Returned Soldiers Club.
SIGNATURE		DATE/
FOR OFFICE USE ONLY		
MEMBER NO:	RECEIPT NO	PAID <b>\$5.00</b>
DATE/ PROCE	SSED BY	