



REDLANDS MODERN COUNTRY MUSIC CLUB INC.

P.O Box 663, Capalaba Qld 4137

Application for Membership

SURNAME: _____

GIVEN NAMES: _____

ADDRESS: _____

SUBURB: _____

POST CODE: _____

PHONE: _____

MOBILE: _____

EMAIL: _____

DATE OF BIRTH: _____

For Family Membership

NAME: _____

DOB: _____

NAME _____

DOB _____

NAME _____

DOB _____

NAME _____

DOB _____

Membership Fees (Please tick)

\$15 ADULT SINGLE 18 YRS

\$10 PENSIONER SINGLE

\$10 STUDENT (Full Time)

\$30 FAMILY MEMBERSHIP

\$20 FAMILY PENSION RATE

Clause 1: Acceptance of membership is undertaken by the club's Management Committee and that committee reserves the right to cancel membership without notice, where non-compliance to the Club Constitution and/or the Club Code of Conduct has been determined.

Clause 2: With acceptance as a member, I agree to support the Conditions of Membership as well as the aims and objectives of the Redlands Modern Country Music Club Inc. as detailed in the Club Constitution.

Clause 3: The club has a current public liability insurance policy to the amount \$20m.

Privacy information: Any personal information given with this membership application will be kept private. Contact details may be used only for matters relating to the Redlands Modern Country Music Club Inc.

APPLICANT'S SIGNATURE: _____ DATE: _____

Nominated by: (print name): _____ Signature _____

Seconded by: (print name): _____ Signature _____