

Yes, I want to be a Member.



I, (Mr) Surname: _____
(Ms) _____
(Mrs) Given Names: _____
(Miss) _____
(Block Letters)

Randwick Labor Club
A.B.N. 35 000 353 417
135 Alison Road
Randwick 2031
Telephone 02 9399-4100

declare that the answers to all questions hereunder are true.

Fax 02 9399-4188
Email enquire@rlclub.com.au
Web www.rlclub.com.au

1. Private Address: _____
_____ Post Code: _____

2. Postal Address: _____

3. E-mail Address: _____

Phone – Home: _____ Business: _____

Mobile: _____

4. Date of Birth: _____ 5. Occupation: _____

6. Do you agree to receive information regarding promotion /gaming: YES/NO

7. Are you a Member of the Australian Labor Party? _____

If so, which Branch? _____

8. Have you been expelled from any licenced Club? _____

I declare that I am over the age of 18 years, and that I am not a Member of any other political party. If admitted to Membership of the Randwick Labor Club I agree to be bound by the existing Rules, Regulations, By Laws and / or alterations which may be made thereto.

Signature of Applicant: _____

Date of Application: _____

Declaration by Nominators.

We, the undersigned, being financial Members of the Randwick Labor Club Ltd, have nominated _____ whom we consider to be a fit and proper candidate for acceptance as a Member.

Signature of Nominators: _____ **Badge No:** _____

_____ **Badge No:** _____



For Office Use Only.

Membership Number: _____ No. of Years: 1 3

Electronic mail: Y N 1 Year: \$5.50 3 Years: \$11.00

Amount Paid: \$11.00 \$22.00 Date: _____