

CITY CLUB Inc
Application for Membership



Applicant to complete

Title: Mr Mrs Family Ms Miss (circle one)

First Names: _____ Last Name: _____

Occupation : _____

Have you ever been refused membership or expelled from any chartered club? **YES/NO**

If YES, please advise name of Club and full details on the reverse of this form.

Have you ever been convicted of any crime within the Crimes Act? **YES/NO**

If YES, please advise of date and full details on the reverse of this form.

Will you allow your name and address to be supplied to Clubs New Zealand to be included on a national register of members? **YES/NO**

PRIVACY ACT STATEMENT

The City Club Inc is collecting and will hold the information on this form. The information is required so that the Club and its members can assess the applicant's suitability for membership (including transfer of membership).

The applicant acknowledges that by signing this form he/she has authorised the Club to obtain, check, exchange information with, and supply information to members of the Club, Clubs New Zealand and Clubs affiliated to Clubs New Zealand.

The applicant is entitled, under the Privacy Act 1993, to have access to, and request correction of personal information held by the Club about the applicant.

I acknowledge that I have read the Privacy Statement above, and acknowledge that the Club will make enquiries into my suitability as a member and should my application for membership be refused, the Club is not required to supply a reason for that refusal.

I hereby agree to abide by the Constitution of the Club and certify that the information provided on this form is correct. I acknowledge that if I have given any false information, it could result in automatic cancellation of my application and or membership of the Club.

Signed: _____ Date: _____

Proposer and Seconder-this section will be completed by the Executive when required.

We declare that we have been financial members of the Club for at least 12 months. We believe this person to be of good character and worthy of recommendation for membership.

Proposer: _____ Member No: _____ Signed: _____

Proposer: _____ Member No: _____ Signed: _____

Applicant to Complete

These details are for Club use only and will not be displayed

Address:

Email:

Phone Number:

Mobile Number:

Date of Birth:

For Club Use Only

Member Number: _____

Amount Paid: \$40.00 single \$50.00 Family

Please circle the appropriate fee.

Bank Account- 06 0705 0006701 00

Receipt No: _____

Date Application Received: _____