|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Member# | | **$5.00 - Life Time Membership** | | | | |
|  | |  |  | | |  |
| □Mr □Mrs □Ms □Miss □Other\_\_\_ **USE BLUE OR BLACK PEN ONLY** | | | | | | |
| **\***First Name: |  | | **\***Surname: | |  | |
| ***Residential***  **\***Address: |  | |  | |  | |
| Suburb: |  | | Postcode: | |  | |
| ***Postal -*** □as above  Address: |  | |  | |  | |
| Suburb: |  | | Postcode: | |  | |
| **\***Mobile: |  | | **\***Phone: | |  | |
| Email: |  | |  | |  | |
| **\*Date of Birth:** |  | |  | |  | |
| **Declaration of Applicant**  I hereby apply for membership to clubs operated by Southside Sport and Community Club Inc. I declare that I am over the age of 18 years, and if accepted, I agree to abide by the Constitution and By-Laws and all other rules and direction that may be, from time to time, imposed  by Club Management of clubs operated by Southside Sport and Community Club. I acknowledge that my membership is not final until my application is approved by the Board of Directors. Should my application be rejected or terminated I will forfeit my membership card and  all entitlements including those that I have accrued prior to my membership being rejected or terminated.  **Proof of identification is required for applications. Date of birth is required for applications.** | | | | | | |
| **\*Signature:** | | | | Date: | | |
| **Privacy Notice** By completing this membership application form, I acknowledge the following:   1. Southside Sport and Community Club Inc. (SSCC) collects the personal information about me included on this form. I understand that if this personal information is not provided it my result in SSCC being unable to process or accept this membership application. 2. SSCC collects my personal information to inform me of its products and services, to provide discounts and special offers, to conduct research and to further develop its products and services. 3. SSCC will take reasonable steps to protect my personal information that they hold about me from misuse and loss and from unauthorised access, modification and disclosure. 4. I understand that SSCC, at time, will disclose personal information to their services providers including Australia Post and mail houses in a manner and purpose that conform with the Privacy Act. 5. I understand I may call (07)32191103 to access or correct my personal information, to stop SSCC sending me information about their products and services, seek clarification on this privacy notice or if I have a complaint. 6. I understand my details may be used by Southside Bingo from time to time for mailing purposes. This will only apply to patrons that have played the game of Bingo. | | | | |  |  | | --- | --- | | **Office Use Only** | | | Date: |  | | Amount Paid: $ |  | | □Cash □Eftpos | | | **Proof of Identity Sighted** | | | □Drivers Licence □Passport □Other  □ Adult proof of age | | | ID Number: |  | | Received by: |  | | Entered by: |  | | | |