

COLLEGE RIFLES BADMINTON CLUB

APPLICATION FOR MEMBERSHIP

The Secretary
College Rifles Badminton Club
PO Box 87-447
Meadowbank, 1742.

Office Hours:
Monday, Wednesday, Friday
10a.m. - 3p.m.
Ph/fax 524 4285 (office)
Ph: 520 6625 (club)

SURNAME.....

FIRST NAME.....MIDDLE INITIAL.....Mr/Mrs/Miss/MS

ADDRESS.....
.....

OCCUPATION.....E-mail.....

Ph No.....Work No.....Mobile No.....

DATE OF BIRTH.....(intermediates only)

PREVIOUS BADMINTON EXPERIENCE.....

I HEREBY APPLY TO JOIN THE COLLEGE RIFLES BADMINTON CLUB AS A:

- | | |
|---------------------------------------|-------------------------|
| * Senior Member | * Interclub Only Member |
| * Casual Member | * Intermediate Member |
| * Ladies Day Member | * Off Peak member |
| * Combined Ladies Day & Senior Member | |
| * Honorary Member | |

Circle the appropriate membership category. See "Classes of Membership" for full Subscription details.

NOTES

All members obtaining a card for the first time will be required to pay \$10-00 (non refundable). Any refund of balance on card must be claimed within 3 months of membership expiring.

I consent to the collection of the above contact details for the purpose of registered player records by the Club and the NZBA. (Your home phone number plus your first and surname could be included in a College Rifles Club book for all members). This consent is given in accordance with the Privacy Act 1993.

Signature_____Dated_____

How I heard about the club: Website Advertising ABA Friend

If paying by Direct Credit our Bank account details are as follows
ASB 12-3086-0159277-00 and please use your name as the reference