

Probus Club Membership Application Form – Australia

itle: Surname:		0
	<u> </u>	Given Names:
referred Nameon Badge:	Spouse,	/Partner Name:
Date of Birth///	_Email Address:	
Address:		Postcode:
elephone:		Mobile:
ormer Vocation:		
role in the Club through my a lunderstand that the information lunderstand that my applicated lacknowledge that at some the Committee. I consent to my name, address, only to members of the Club lunderstand that I may access laccept that the information provided lunderstand that the minimum advise the Club Secretary in with not wish to be contacted by I understand that the Club has coverage through the Club may promote the Club and its event advised the Club Secretary in I understand that I do not conse	attendance and participation. ion provided in this application will be used to tion may not be processed if any of the absime during my membership, I may be called telephone number and email address being in the same personal information the Club hold ovided in this application form will be provided which can be viewed on the PSPL website in information required by PSPL is my first nariting if I do not want PSPL to hold any of the PSPL. Sepublic Liability Insurance of \$20 million the secretary or the PSPL website. Sepublish photographs of its members on its its. By signing this application form, I consent in writing that I do not consent to such pulletary may provide photographs of its member on form, I consent to the publication of such pent to such publication.	ed upon to take an active role on the Management included in the 'Directory of Members' to be distributed is about me upon request. It to Probus South Pacific Limited (PSPL) in accordance e. It is may responsibility to additional information in this application form or I do rough PSPL and that I can access a summary of this is website, in its newsletter and/or on social media to to the publication of such photographs unless I have
Applicant's Signature		Date:
Sponsored by*:	Signature:	Date:
Snonsored by*:	Signature:	Date:
porisored by		

Monies Received: ______Membership badge ordered: _____

A copy of this completed form should be sent to PSPL at general@probussouthpacific.org