



MEMBERSHIP APPLICATION

☐ NEW☐ RENEWING

Date of Application

Membership Length

Membership Number

/ /	☒ 1 YEAR \$2.50	☐ 5 YEARS \$10.00	#
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Personal Information

*Denotes compulsory entry requirement.

Title:		DoB* / /	
Given Names*		Surname*	
Residential Address*			
Suburb*		State*	Post Code*
Postal Address (if different)			
Suburb		State	Post Code
Contact Number*		Email	
Occupation*			
Do either of these questions apply to you? If so, please Tick*			
☐ Are you a Politically Exposed Person?			
☐ Is a family member or close associate a Politically Exposed Person?			
Declaration*			
☐ I declare that the information I have supplied is true and correct in every way. I understand that I am required to adhere to the Club's constitution and other rules that may be handed down from time to time. I understand that my failure to obey and abide by these rules and any other relevant legal obligations may void my membership.			
☐ I understand that the TSC at times may disclose personal information about me to their service providers in a manner that conforms with the Privacy Act. I understand I may contact the TSC to access or correct my personal information, to stop the TSC sending me information, seek clarification on this privacy statement or make a complaint.			
☐ I have read and understand the Privacy Statement that was made available to me upon application.			
APPLICANTS SIGNATURE*			
☐ I do not wish to receive correspondence from the Toowoomba Sports Club.			

OFFICE USE ONLY

APPROVED ID PROVIDED Please Tick*

- ☐ Driver Licence ☐ Proof of Age Card ☐ International Driver Licence ☐ Passport
☐ Other Approved ID Type: (specify)

Number:

State/Country:

- ☐ Photo has been taken ☐ Details have been correctly input on WILDCAT ☐ Card issued

STAFF NAME:

SIGNATURE:

Checked by: