



## MEMBERSHIP APPLICATION

To apply for your membership, please apply in person and provide appropriate identification eg. Driver's Licence

Are you a:  New Member  Renewing Member. If so, existing member number \_\_\_\_\_

(Please circle) Mr / Mrs / Ms / Miss / Dr / Other \_\_\_\_\_

Last name: \_\_\_\_\_

First and middle names: \_\_\_\_\_

Preferred first name (if different): \_\_\_\_\_ DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Residential address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Postal address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Home telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Occupation: \_\_\_\_\_ Nationality: \_\_\_\_\_

Email address: \_\_\_\_\_

## TYPE OF MEMBERSHIP (prices include GST.)

Ordinary membership:  5 Years - \$35  3 Years - \$27  1 Year - \$12

## CARD BASED GAMING

Your membership card is automatically activated for card based gaming, providing greater convenience and security. Please tick one of the following card-based gaming options:

- I do not wish to set a weekly account limit
- I would like to set my weekly account limit at: \$ \_\_\_\_\_ from: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

If you agree with the following statements and terms and conditions overleaf, please consent by signing below:

1. I have read and understood the terms and conditions of Springwood Sports Club's Membership Rewards Program.
2. I am over the age of 18.
3. I understand it is my responsibility to ensure my PIN is kept confidential at all times.
4. I understand the security of my money in player accounts is the responsibility of both the Club and myself as the account holder.
5. I am aware that I can only have one card and one account at any time.
6. I understand the government has placed a \$1,000 limit on player accounts.
7. I have read the instruction leaflet on card-based gaming.

Please tick below if you would like your membership card de-activated for card based gaming:

Yes, please de-activate card based gaming.

### PRIVACY STATEMENT

Mingara Recreation Club Ltd t/as Springwood Sports Club is subject to the provisions of the Privacy Act and the Australian Privacy Principles. Any personal information the Club holds about you will be protected. We do not provide your personal information to third parties. Your personal information may be used by the Club for marketing purposes, to improve our services and to provide you with the latest information about those services as well as new related services and promotions. You have a right to access any personal information that the Club may hold about you, including a right of correction of information. The Club's Privacy Policy is available, in full, on our website and has further details on how to access your personal information held by Springwood Sports Club. If you require any further information, please contact the Club by phoning (02) 4751 1298, email to admin@springwoodsports.com.au or mail to 83 Macquarie Rd, Springwood NSW 2777

### DIRECT MARKETING OPT-IN

By signing this Club membership application form, you agree to receive direct marketing and to be contacted by the Club using all relevant means (for example, website, email, mobile, landline telephone, SMS and direct mail) and applies for an indefinite period of time, unless you expressly withdraw consent by notifying us. Withdrawal of consent does not apply to mandatory notices such as Notice of AGM and Notice of Membership Renewal. If you wish to withdraw your consent, please contact the Club by phoning (02) 4751 1298, email to admin@springwoodsports.com.au.

Please tick if you wish to receive information about gaming and gaming-related promotions.

### REFUND POLICY

Our refund policy sets out the commitments we make to all our members. We are committed to providing value for money club membership, however all membership subscription payments are non-refundable or transferrable.

I hereby agree to abide by the Constitution and By-laws adopted by Mingara Recreation Club Ltd. (t/as Springwood Sports Club).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## OFFICE USE ONLY

Membership No.: \_\_\_\_\_

ID sighted: \_\_\_\_\_

Number: \_\_\_\_\_

Expiry date: \_\_\_\_\_

Date received: \_\_\_\_\_

Staff name: \_\_\_\_\_

BOD meeting: \_\_\_\_\_

Proposed by: \_\_\_\_\_

Seconded by: \_\_\_\_\_