

HERVEY BAY CITY BRIDGE CLUB Inc

ABN 94 640 175 415 APPLICATION FOR MEMBERSHIP

Surname:		Given Name:	
Address:			
			Code:
Email:			
Telephone: (H):		Mobile:	
Date of birth:	(please not	e that the ABF requires at least the da	ate and the month)
Have you ever beer	convicted of an indictab	le offence?	Yes / No
Have you ever beer	subjected to disciplinary	<pre>/ action at another Bridge Club?</pre>	Yes / No
0	•	e published in the Annual Programr contact details. (please circle)	ne Booklet which
Home: Yes / No	Mobile: Yes / No	Email: Yes/No	
I give permission for	⁻ my birthday to be added	d to the Club Birthday list (please c	circle)
Birthday List: Yes /	No		

Confirmation of Application

I hereby apply for membership of the Hervey Bay City Bridge Club Inc. and undertake to abide by the Constitution and By-Laws thereof.

Signature:	Date:	
Proposer:	Signature:	
Seconder:	Signature:	

Please turn over

Emergency Contact Details

Name:	 Contact No:

ABF Affiliation Status

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	I have/have not been issued with an ABF Number
	I do have an ABF number, but I am not currently registered ABF no
	I wish to transfer my current membership from my home club to this Club ABF no
	I am a member of a Club outside of Queensland and want to be a Multi-Club Member
	I want to remain with my current home Club in Queensland and be a Multi-Club Member

Financial Year Subscriptions

The Financial Year is 1 January to 31 December	
Home Club Member: \$55 per year	Multi-Club Member: \$30 per year
Payment Method: (Please circle)	
Cash / Cheque / Direct Deposit (BSB 124088	, Account No. 22647078 Ref: Your Name)

Office Use Only				
Date Approved:	Signature			
Date Paid:	_ABF Notification:	_QBA Notification		