



WESTERN SUBURBS

ESTABLISHED 1908

NEW MEMBERSHIP APPLICATION

FULL NAME: _____

DATE OF BIRTH _____

STREET ADDRESS: _____

SUBURB: _____ STATE _____ POSTCODE _____

PHONE NUMBER _____ EMAIL _____

I AM CURRENTLY A MEMBER OF WESTS ASHFIELD LEAGUES WESTS TIGERS

MEMBERSHIP TYPE (PLEASE CIRCLE)

\$50.00 for TWO YEARS

\$30.00 for ONE YEAR

\$10.00 for TWO YEARS AGED PENSION

\$5.00 for ONE YEAR AGED PENSION

I, _____, hereby apply for membership of the
WESTERN SUBURBS DISTRICT RUGBY LEAGUE FOOTBALL CLUB LIMITED.

I understand that if my application is accepted I shall become bound by the provisions of the club's Memorandum and Articles of Association and by the provisions of the Memorandum of Associate and Rules and Regulations of the New South Wales Rugby League Limited and I undertake to observe such provisions.

I also understand that your Club's acceptance of my application can have no force or effect or confer any rights on me unless my application is also endorsed as acceptable by the New South Wales Rugby League Limited and that the league may refuse such endorsement in its absolute discretion and without giving reasons for such refusal. I authorise your Club and the League to make such enquiries as are thought necessary in relation to my application.

Signed: _____ **Date:** _____

Membership of the Football Club must be held for a minimum of three years (3) before members receive voting rights.

PAYMENT

CASH - Cash payments can be made in person at the Football Club Office.

CHEQUE / MONEY ORDER - Please make payable to: Western Suburbs DRLFC Ltd

CREDIT CARD - Card Type: (Please Circle One) MASTERCARD VISA

Name On Card: _____ Credit Card Number: _____

3 DIGIT Card Security Code: (Located on Back of Card) _____ Expiry Date: __ / 20__ (mm/yyyy)

Card Holders Signature: _____

RETURN THIS APPLICATION TO: **WSDRLFC Membership**
Administration & Football Operations Centre
PO Box 642,
Liverpool. NSW. 1870

Thankyou for the support of your Western Suburbs Magpies!