

**Office Use Only**  
Member  
No. \_\_\_\_\_

# Workers CLUB LTD

## MEMBERSHIP APPLICATION

Select Term: (Please Circle)

**1 Year - \$10**

**5 Years - \$30**

**Mr Mrs Ms Miss** (Please Circle)

Date of Birth: \_\_\_\_\_

Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_

Street Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

Would you like to receive promotional information? Yes / No

Would you like to receive gaming associated information? Yes / No

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Details: \_\_\_\_\_

The MDWC is subject to provisions of the Privacy Act 1988. The personal information provided by you on this form/application and attached documents will be used to process your information. Failure to provide all requested information may result in your application being rejected. You have the right to access and correct any of your personal information that the Club holds about you.

The Club does not usually disclose your information to any other organisations or persons unless there is a legal requirement to do so. The Club may disclose your personal information to third parties that provide services to the Club. These contractors require the third party to keep your personal information confidential and secure. Your personal information, including information about you obtained as a result of your placing your Membership card in a gaming or other Club machine (not ATM), may be used by the Club for marketing purposes, to provide you with the latest information about those services, any new related services and promotions.

I certify that the above particulars are correct and hereby apply for Membership to the Muswellbrook & District Workers Club Ltd. I declare that I am over 18 years of age. If I am accepted, I agree to abide by the Constitution and rules of the Club.

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

**Office Use Only**  
Identification: Driver's License / Photo ID / Pension Card / Passport ID Number: \_\_\_\_\_  
Staff Member: \_\_\_\_\_