Membership Application

First names..... Mr/Mrs/Miss/Ms/Dr/Other.....

Last name..... Known as.....

Have you ever been known by any other name? Yes ◯ *Name:*..... No ◯

Date of Birth / / Occupation.....

Emergency Contact:

Name..... Phone.....

Email Address.....

◯ I wish to subscribe to the Johnsonville Club e-news, to receive information and notifications regarding Club facilities entertainment and adjuncts

Full residential address .....

..... Post Code.....

Postal address
(if different from above) .....

..... Post Code.....

Home Phone Mobile

Have you ever been refused membership or expelled from any chartered Club? Yes ◯ No ◯

Will you allow your name and address to be supplied to Clubs New Zealand to be included on a national register of members? Yes ◯ No ◯

	Ordinary	Senior	Country	Junior - Free
1 September - 31 August	$50.00 ◯	$25.00 ◯	$10.00 ◯	◯

By signing this form I accept that my application can be accepted or declined by the Board and I consent on becoming a member to abide by the constitution, by-laws and policies including privacy policy which is available from the club on request and on our website www.jclub.co.nz/privacy

Applicants Signature..... Date.....

Before submitting, the membership fee detail above must be completed and the $ fee as shown must accompany the application. Should the application be declined or rescinded, payments made will be refunded in full.

Office use only Fee Paid $..... Date Received..... Card#.....