

APPLICATION FOR MEMBERSHIP

Social Member

MEMBERSHIP TYPE: 1 YEAR \$6 ☐ 5 YEAR \$25 ☐ FULL \$75 ☐ FULL PENSIONER \$70 ☐

Memberships expire at the end of the Financial Year (30 June)

MR ☐ MRS ☐ MISS ☐ MS ☐ SURNAME:

GIVEN NAME(S):

FEMALE ☐ MALE ☐ DATE OF BIRTH:

HOME PHONE: MOBILE:

EMAIL: OCCUPATION:

STREET ADDRESS:

SUBURB: STATE: POSTCODE:

POSTAL ADDRESS (if different):

SUBURB: STATE: POSTCODE:

Your membership card is automatically activated for Card Based Gaming, providing greater convenience and security.

If you agree with the following statements please consent by signing below:

1. I have read and understood the terms and conditions of East Maitland Bowling Club Rewards Program.
2. I am over the age of 18 years.
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 \$10,000 limit on player accounts.
7. I have read the instruction leaflet on Card Based Gaming.

Please tick if you wish to **de-activate** Card Based Gaming on your membership card: ☐

Would you like a concise Financial Report posted to you? YES ☐ NO ☐

Do you wish to receive general promotional material from the Club via post from time to time? YES ☐ NO ☐

Do you wish to receive general promotional material from the Club via email from time to time? YES ☐ NO ☐

Do you wish to receive gaming related promotional material from the Club from time to time? YES ☐ NO ☐

IMPORTANT NOTICE - CIVIL LIABILITY ACT 2002 (NSW) - RISK WARNING AND WAIVER

All persons are warned that participation in lawn bowls, golf and other recreational activities may involve the risk of personal injury caused by, for example, falls or physical exertion. It is a condition of entry to these premises, bowling greens and golf course that any person who engages in lawn bowls, golf and other recreational activities agrees to do so entirely at his or her own risk.

By Order of the Board of Directors

SIGNATURE: DATE:

I wish to become a member of East Maitland Bowling Club Limited and Easts Leisure & Golf and hereby agree to be bound by your Articles of Association and Rules or Laws made hereunder.

SIGNATURE: DATE:

Date of Board Meeting (joining) Membership #
Date (receipt) Receipt #
ID Type Amount paid CASH / EFTPOS / CHEQUE
ID Number
Application checked and entered in computer by (signature)

PRIVACY STATEMENT

East Maitland Bowling Club and Easts Leisure & Golf are subject to the provisions of the Privacy Act 1988. The personal information provided by you on this form/application will be used to process your membership application. Failure to provide all of the requested information may result in your application being rejected. You have a right to access and correct any of your personal information that the Club holds about you.

The Club does not usually disclose your personal information to any other organisation or person unless there is a legal requirement to do so. The Club may disclose your information to third parties that provide services under contract to the Club. These contracts require the third party to keep your personal information confidential and secure.

Your personal information, including information about you obtained as a result of you placing your membership card in a gaming or other club machine (not ATMs), may be used by the Club for marketing purposes to improve our services and to provide you with the latest information about those services and any new related services and promotions.

See www.embc.com.au for full Privacy Policy.

Think! About your choices. Call Gambling Help 1800 858 858 or visit www.gamblinghelp.nsw.gov.au

East Maitland Bowling Club
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www.embc.com.au

Easts Leisure & Golf
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