



## MEMBERSHIP APPLICATION

### Mayfield Sports Club

58 Crebert Street, Mayfield NSW 2304

P: 4968-2144 F: 4967-4432

E: info@mayfieldsports.com.au

W: mayfieldsports.com.au

Payment, proof of age and identification  
Must accompany this application

Please print

Circle: Mr Mrs Miss Ms

Surname: \_\_\_\_\_ First Name \_\_\_\_\_

Residential Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_

E-mail \_\_\_\_\_

Date of birth \_\_\_\_\_ Occupation \_\_\_\_\_

I request you to enter my name in the Register of members as an Ordinary Member, and I agree to be bound by the Constitution, Rules, By-Laws & Regulations of the Club now or from time to time.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

Member's request pursuant to Section 316 of the Corporations Act.

If you do not wish to receive a copy of the Club's Annual Report, please complete the below section;

I, \_\_\_\_\_ (print name) of \_\_\_\_\_

\_\_\_\_\_ (address)

Hereby make a standing request to Mayfield Sports to cease sending material as required by Section 316 of the Corporations Act.

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

#### OFFICE USE

Identification \_\_\_\_\_ Witnessed by \_\_\_\_\_

Membership number \_\_\_\_\_ One Year \$5.50 \_\_\_\_\_ Five Year \$22.00 \_\_\_\_\_