

BEACHLANDS CHARTERED CLUB INC – APPLICATION FOR MEMBERSHIP

DATE OF BIRTH: OCCUPATION:		
EMAIL:		
PHONE: MOBILE:		
ADDRESS:		
Your application will be posted on the Club notice board for 14 days, advising members of y	our applic	ation)
Have you ever been refused membership or expelled from any chartered club?	YES □	NO 🗆
Have you ever been convicted of any crime within the Crimes Act?	YES □	NO 🗆
		<u> </u>
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 🗆
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