

Maclean Lower Clarence Services Club Limited

“The River Club”

36-38 River Street, Maclean NSW 2463. PO Box 6, Maclean.

Tel: 02 6645 2946; Fax: 02 6645 4235



Membership Application Form

To the Directors,

I hereby apply for social membership of the Maclean Services Club.

I declare that I am over 18 years, and if accepted for membership, agree to abide by the constitution, rules and laws of the Maclean Services Club.

Tick Appropriate: Mr Mrs Ms Miss

Surname: _____

Given Names: _____

Address: _____

Town: _____ State: _____ P/Code: _____

Postal Address (if different from above): _____

Email Address: _____

Signature: _____

Date: _____

Membership applies from the 1st of January to 31st December. The Maclean Services Club is subject to the Privacy Act 1998. The personal information provided by you on this form will be used to process your membership application. Failure to provide all of the requested information may result in your application being rejected. The club may disclose your information to third parties that provide services under contract to the Club and may use this information for marketing purposes and to provide you with the latest information about services and promotions. You have the right to access and correct any of your personal information that the club holds about you.

Proposer: _____ M/Ship No: _____

Seconder: _____ M/Ship No: _____

OFFICE USE ONLY

Date Paid: _____ Receipt No: _____

Membership No: _____ Signing Officer: _____