



GOOSIES
GOOSEPONDS SPORT
AND RECREATION CLUB

SOCIAL MEMBERSHIP APPLICATION

DATE:

TITLE:

FIRST NAME:

SURNAME:

ADDRESS:

SUBURB:

POST CODE:

DOB: / /

PHONE NO:

EMAIL:

ID TYPE & NUMBER:

GOOSIES AFFILIATE:

- BMX PIONEER BOBCATS WONDERERS F.C.
 50's & BETTER BINGO

DECLARATION: I am over the age of 18 years and wish to become a social member of Gooseponds Sport and Recreation Club. I request that my name be entered on the Members Register. I agree to be bound by the provision of the rules of association and by laws.

SIGNATURE:

OFFICE USE ONLY

STAFF:

DATE:

RECEIPT NO:

MEMBERSHIP NO: