



# Social & Community Membership Application Form

\*Mandatory field

\*Sub-Branch joining:

\*Membership Type: Social  Community

\*Title: Mr  Mrs  Ms  Miss  Other

\*First Name:

\*Last Name:

\*Male / Female

\*Date of Birth:

\*Postal Address:

Street:

City/Suburb:

Post Code:

Telephone:

Home: (  )

\*Mobile:

\*Email Address:

I understand that as a member of the RSL I will receive information and updates relating to RSL events, activities and offers from the RSL and its business partners. I will always have the opportunity to unsubscribe. For the RSL privacy policy please visit [rslvic.com.au](http://rslvic.com.au)

Yes, I would like to receive additional material relating specifically to gaming machines and related activities.

## OFFICE USE ONLY

Date application approved:

Membership no.:

Card issued:  Staff Name:

Identification viewed: