Membership Application



KING TOMISLAV CROATIAN CLUB LTD

Date Of Birth:	// dd/mm/yyyy				
Title	Name:				
Home Addres	S:		Postcode_		
Phone	(Home)	ome)(Work)			
	(Mobile)				
Occupation _					
Email address	S				
Mailing Addre	SS				
Oo you wish to	be notified of upcoming promotions?		□ Yes	□ No	
Do you wish to receive gaming related promotional material from the Club?			□ Yes	□ No	
Do you wish to receive a copy of the Club's Annual Reports?			☐ Yes	□ No	
Please indicate how you wish to receive notices that the Club is required to send.			☐ Post	□ Email	
	I, the undersigned, am over the age of gulations and By-Laws of the Club.	18 and I agree if accepted	as a Member	to abide by	
APPLICANTS	S SIGNATURE	DAT	ED:/	/	
	or and Seconder must be financial O omislav Croatian Club Ltd.	ordinary Voting Members			
Nominated B	y Name				
	Signed	Badge No			
Seconded By	Name				
	Signed	SignedBadge No			
FOR OFFICE	USE ONLY	ID SIGHTED: Sign.	ature:		
	/20	☐ Drivers Licence	 □ Passpor	 t	
Processed By	·	☐ NSW Photo Card	i		
		□ Other			