

Pauanui Sports & Recreation Club Inc.

Membership Application

Mr/Mrs/Miss/Ms (circle one)

Surname: _____ First Names: _____

Date of Birth: _____ (Circle one) Male / Female

Home Phone: _____ Mobile Phone: _____

Other Phone: _____ Email Address: _____

Home Address: _____ Mailing Address: _____

Pauanui Address (if applicable): _____

Have you ever been a member of the Pauanui Sports & Recreation Club? (select one) Y N

If so, how long ago? _____

What type of membership are you seeking?

(please select all that apply)

Junior / Adult

Recreational / Golf / Tennis / Bowls / Full Sport

Affiliated / Non Affiliated

I, hereby apply for membership to the Pauanui Sports and Recreation Club Inc. I agree to accept and abide by the set Rules & Regulations of the Club and certify that all the information on this application form is correct.

I acknowledge that if I have given false information on this form, it may result in automatic cancellation of my application and/or membership, regardless of whether I have already made a payment.

Signature of Applicant: _____ Date: _____

If under 18:

Signature of Guardian: _____ Date: _____

Payment Options: (Please circle one) Credit Card / Direct Debit / Cheque (Payable to: The Pauanui Club)

Credit Card: (Please circle type): Diners / Visa / Mastercard / Amex

Card #: _____ Expiry Date: _____

Name on card: _____

If paying by Direct Debit, please be sure to identify your name and payment as being for 'membership'.

Deposit Payments to: 02 0456 0034743 00

If paying by Cheque or Credit Card, please mail to: The Pauanui Club, P.O Box 65, Pauanui Beach, 3546