



The Gordon Stags Gordon Rugby Football Club

www.gordonstags.org.au

MEMBERSHIP APPLICATION

*I hereby apply for membership of the Gordon rugby Football Club Ltd.
I agree to be bound by the Club's Memorandum and Articles of Association.*

Please complete the following form and return it, with payment to the address below
Please take time to complete all sections

Rugby Membership benefits include:

- Coverage by Players Insurance
- Financial support of **YOUR** club
- Access to the Highlander Home games
- Entry to the Gordon Club

Personal Details

Title: (Please circle one) Dr / Mr / Mrs / Miss / Ms

Surname: _____ **Given Name:** _____

Address: _____ **Date of Birth:** _____

_____ **Post Code:** _____

Telephone: (Home) _____ **(Business)** _____ **(Mobile)** _____

Email: _____

Signature: _____

Emergency Contact Details

Name: _____ **Relationship:** _____

Telephone: (Home) _____ **(Business)** _____ **(Mobile)** _____

	Name	Member Number	Signature
Proposed By:			
Seconded By:			

PAYMENT DETAILS – Membership Year January 1st to December 31st (GST Included)

Please accept my application for **Gordon Stags Golden Oldies** membership for 1 year (\$35.00)

Cash, Cheque or Money Order enclosed (made payable to Gordon Stags)

Post to: Gordon Stags, 97A Wycombe Road Neutral Bay 2089