

THE SUNSHINE CITY CLUB

APPLICATION FOR MEMBERSHIP 2023-24

I the undersigned wish to make this application for membership of The Sunshine City Club, and I declare that I have never been refused membership of, admission to, nor expelled from any other club for any reasons whatsoever. And should I be granted membership I hereby agree to be bound by and observe the constitution of The Sunshine City Club.

Applicant Please Print Your Details As Listed Below:	
Surname:	DOB / / /
Given Names:	
Home Address:	
	Postcode:
Suburb / City:	
Phone Number: ()	Mobile:
Email Address:	
Signature:	/ /
OFFICE USE ONLY:	
Received by the Administration Secretary on / /	
Signed Administration Secretary:	
SYSTEM ID:	
MEM #:	

Address: 24 Talmage St, Albion Vic 3020 ABN: 98 004 364 890