



VHRSL-SA Application for New and Returning Affiliate Membership

I hereby apply to be admitted as a Affiliate Member of the Returned & Services League of Australia and a member of the: _____ Sub-Branch.

Personal Details

Title: _____ Given Names: _____
Surname: _____
Sex: _____ D.O.B: _____ Country of Birth: _____
Postal Address: _____
Suburb: _____ Post Code: _____ State / Country: _____
Phone(W): _____ (H): _____ (M): _____
Email: _____

Are you related to a Service person Yes No
If "yes" please specify: Service Number: _____ Name: _____
Unit Served With: _____ Conflict: _____

Previous Membership Details (If applicable)

Previous Membership: Yes No

Badge number of previous membership: _____ Date first joined the League: _____
State & Sub-Branch of previous membership: (if applicable) _____

Declaration and Agreement

I declare that the above information is true and correct.

I agree to uphold the Constitution of the League and its By-Laws

Signature of Applicant: _____ Date: _____

Proposed By: _____ Seconded By: _____

Accepted by Sub-Branch: _____ (Honorary Secretary) _____ Date: _____
Sub-Branch Member Sub-Branch Member

Payment can be made **1.** direct to the Victor Harbor Sub-Branch RSL, in cash or by EFTPOS, **2.** to the Victor Harbor General Account via Electronic Funds Transfer (please quote your name) at **Westpac BSB: 035621 Account No: 760731**, or **3.** by cheque or money order via Australia Post address to the Treasurer, RSL Victor Harbor Sub-Branch, Cnr George Main & Bay Roads, VICTOR HARBOR SA 5211. **Cheques to be made payable to RSL, Victor Harbor Sub-Branch Inc.** Please include this form with your cheque or money order. Please do not post cash

Privacy Statement

We will not use any of the information on this membership form without your specific permission in writing, other than to record you as a member of the League and will not pass that information to anyone outside the League.
ABN 45 478 812 520