Membership Application Form – Australia 2024

I hereby apply for membership of the **PROBUS CLUB OF MALVERN INC.**

Title:_____ Surname:_____ Given Names:_____

Preferred Name on Badge:_____ Spouse/Partner Name: _____

Date of Birth____/____/____ Email Address: _____

Address:_____ Postcode: _____

Landline:_____ Mobile: _____ Former Vocation: _____

Hobbies, Sporting & Other Interests: _____

_____

In case of emergency, please contact: _____ Relationship: _____

Emergency Contact Telephone: _____ Mobile: _____

(The Emergency Contact person should not be a member of the Club)

1. I agree to be bound by the provisions of the Club's constitution, by-laws and/or standing resolutions and agree to take an active role in the Club through my attendance and participation.
2. I understand that the information provided in this application will be used to assess my application and maintain my membership. I understand that my application may not be processed if any of the above information is not provided.
3. I acknowledge that at some time during my membership, I may be called upon to take an active role on the Management Committee.
4. I consent to my name, address, telephone number and email address being included in the 'Directory of Members' to be distributed only to members of the Club.
5. I understand that I may access any personal information the Club holds about me upon request.
6. Unless advised otherwise in accordance with point 7 below, I consent to the information provided in this application form being provided to Probus South Pacific Limited (PSPL). I understand that this information may be used, held and disclosed by PSPL in accordance with the PSPL Privacy Policy which can be viewed at www.probussouthpacific.org or by clicking here (online access only). By signing this form, I acknowledge that I have read and agree to the terms of the PSPL Privacy Policy.
7. I understand that the minimum information required by PSPL is my first name and last name and that it is my responsibility to advise the Club Secretary in writing if I do not want PSPL to hold any of the additional information in this application form or I do not wish to be contacted by PSPL.
8. I understand that PSPL's National Insurance Program provides Public Liability Insurance of $20 million and that I can access a summary of this coverage through the Club Secretary or the PSPL website.
9. I understand that the Club and/or PSPL may publish photographs or videos of members on their websites, in newsletters and on social media to promote the Club and Probus generally. By signing this application form, I consent to the publication of such photographs and videos unless I have advised the Club Secretary in writing that I do not consent to such publication.
10. I agree to receive *Active Retirees* publications from PSPL, which I can unsubscribe from at any time.

Applicant's Signature:_____ Date: _____

Sponsored by*:_____ Signature:_____ Date: _____

Sponsored by*:_____ Signature:_____ Date: _____

**** MEMBERSHIP APPLICATIONS MUST BE SPONSORED BY TWO FINANCIAL MEMBERS OF THE CLUB. FOUNDATION MEMBERS OF NEW CLUBS DO NOT REQUIRE SPONSORS.***

CLUB USE ONLY Date Received:_____ Approved by Committee on: _____

Monies Received:_____ Membership badge ordered: _____

A copy of this completed form should be sent to PSPL at general@probussouthpacific.org