



NORTH THURINGOWA JUNIOR RUGBY LEAGUE FOOTBALL CLUB INC

CLUB MEMBERSHIP APPLICATION - 2019

SURNAME: _____

GIVEN NAME/S: _____

PREFERRED NAME: _____

ADDRESS: _____

_____ QLD PC: _____

PHONE No: _____ MOBILE: _____

PREVIOUS MEMBER NUMBER: _____ YEAR: _____

Email: _____

OCCUPATION: _____

NAME OF CHILD/REN PLAYING: _____

Interested in partaking in fundraisers & working bees? YES / NO

I am aware of the Constitution of North Thuringowa Rugby League Football Club Incorporated, ARL National Code of Conduct and hereby agree to abide to the rules and conditions set out therein and rules and conditions set down by the club. A copy can be obtained at the office as required.

Membership cost of \$10.00 payable upon application.

.....
Applicants Signature Date

.....
Approved by Club Executive Date

Date Membership Paid: Receipt No:

MEMBERSHIP NUMBER: _____

The committee, players and parents of North's JRL thank you for registering your interest in becoming a part of the North's family and look forward to many more years of your support.