



# Epping and District Probus Club Inc.

## Application for Membership

I hereby apply for membership

First Name: ..... **SURNAME:** .....

Preferred Name: ..... Date of Birth : .....

Address: .....

..... Post Code: .....

Telephone: (.....)..... Mobile: .....

Email address: .....

Profession and Last Employment: .....

Main Hobbies & other interests: .....

.....

Spouse/Partner's Name: .....

In case of emergency, please contact my (.....) .....

(Must **NOT** be Spouse/Partner)

Emergency contact's address: .....

Telephone: (.....)..... Mobile: ..... Work: .....

I agree to accept the concept of Probus and to take an active role in both attendance and participation of this club. I understand that the information provided in this application forms part of the requirements of membership. I acknowledge that at some time during my membership I may be called upon to take an active role in the Club Management.

### Privacy Statement:

Information given above is kept private and confidential and may only be used within the confines of Probus and shall not be used for any other purpose.

I consent to my name, address, email address and telephone number being included in a "Directory of Members" to be distributed only to members of the Epping and District Probus Club Inc. and not distributed or sold to outside agencies. I accept that the information may be used by Probus for Probus use only.

Signature: ..... Date: .....

Proposed By: ..... Telephone: .....

Seconded By: ..... Telephone: .....

Approved at Committee Meeting Date: ..... Inducted Date: .....

**Dues:** [2021] **Annual** (pro-rata of \$30.00): ..... **Joining:** \$20.00; Total: \$.....  
[Annual Dues pro-rata bands: Apr-Jun 100%, Jul-Sep 75% (\$30.00), Oct-Dec 50% (\$20.00); Jan-Mar 25% (\$10.00)]