MEMBERSHIP FORM



PERSONAL DETAILS

Given Name/Surname		
	Postcode	
Mobile Phone	Business Ph	none
	DOB	/ /
Emergency Contact Name/Phone		/ /
	Mobile Phone	Postcode Mobile Phone Business Ph DOB

LET US KNOW

SMS Text Messages (I would like to recieve text SMS messages)			□ Yes	🗆 No
Annual Reports			🗆 Do not send	🗆 Via Post
Promotional Information (I would like to receive information on member rewards scheme/promotions)			🗆 Do not send	🗆 Via Post
Membership Type	Associate	□ 1 Year \$5.50	□ 5 Years \$25.00	
	Pensioner (Must supply proof of Commonwealth pension)	□ 1 Year \$3.50	□ 5 Years \$15.00	

PRIVACY POLICY

Riverstone - Schofields Memorial Club Ltd is bound by the Privacy Act 1988. The Club has a legal obligatin to the privacy and the safeguarding of member, guess and staff personal information. The Club will not disclose your personal information to any other organisation or entity, unless required by law to do so.

CASHLESS GAMING

Enrolment into the Club's player reward scheme is voluntary. The security of money in player accounts is the responsibility of both the registered club and the account holder. The government and its agencies take no responsibilities for any losses that mightoccur from the account. The account holder is solely responsible for ensuring that the account holder's personal identification number ("PIN") is kept confidential and that no other person has access to the account holder's player card. The account holder is liable for any losses that might arise from, or in connection with, the account holder's player card. The account holder is liable for any losses that might arise from, or in connection holder's failure to comply with such resposibilities. The club provides the ability to set a limit on the amount of the next expenditure (ie turnover less wins) per week from a player account.

Please let us know if you would like to opt-out of the Club's player rewards scheme, set a weekly limit on your player account or simply op-out from receiving information regarding our services or promotions. Player activity statement available on request. The clubs Annual report is available for download from our website www.riverstonememorial.com.au.

Think! About your choices. Call Gambling Help 1800 858 858 www.gamblinghelp.nsw.gov.au

Signature of Applicant	Date	/					
OFFICE USE ONLY							
Date	Amount Paid		Membership No.				
Identification Type	□ Drivers License	🗆 Photo Card	□ Pension Card	□ Passport			
Staff who accepted application (Print Name)							
Staff who processed application (Print Name)							