

Application for Membership - 2023

☐ **Single** Membership \$40 ☐ **Double/Family** Membership \$50 (Max 3 members at same address)

Name of Member 1: _____

Address: _____

Suburb: _____ Post Code: _____

Contact Numbers: Home: _____ Mobile: _____

Email: _____

DOB: _____ CCLC Member Number: _____ Expiry: _____

Signed: _____ Dated: _____

Additional Members (living at the same address)

Name of Member 2: _____

Contact Numbers: Home: _____ Mobile: _____

Email: _____

DOB: _____ CCLC Member Number: _____ Expiry: _____

Name of Member 3: _____

Contact Numbers: Home: _____ Mobile: _____

Email: _____

DOB: _____ CCLC Member Number: _____ Expiry: _____

Payment Options: ☐ **Cash** (in person with form) ☐ **Cheque** (in person with form)

☐ **Direct Deposit** (preferred method)

Central Coast Leagues Club Camera Club

BSB: 633 000

A/C: 148014525

Please include your **First Initial and Surname in the deposit details.**

Email a copy of this form together with a copy of your CCLC Membership Card to **cclccc2014@gmail.com**.

Receipts will be provided once your payment has cleared

Please Note:

- 1 All Members must be financial members of the Central Coast Leagues Club.
- 2 Email Addresses will only be used for CCLCCC purposes and will not deliberately be passed on to any third party.
- 3 Members joining after 1st August pay 50% of annual Subscription