

2013/14 THE GABBA WAITLIST MEMBERSHIP APPLICATION FORM

Applicant Details

Mr Mrs Miss Ms Dr Other _____

Given Names: _____

Surname: _____

Date of Birth: _____

Gender: Male Female Shirt Size: _____ Occupation: _____

Contact Details for Correspondence

Street Address: _____ Home Phone: _____

Suburb: _____ Business Phone: _____

City: _____ Mobile Phone: _____

State/ Province: _____ Fax Number: _____

Country _____ Email Address: _____

Post Code: _____

Fees and Charges

Application Fee \$25.00 (Application Fee is one off fee payable to be added to the membership waiting list)

Membership Application Category (Please indicate the type of membership you are interested in)

Adult Guests Junior Family
 No of Guest cards (up to 3) _____ No of Cards (Adults/Children) _____

Applicants will receive confirmation in writing upon receipt of this application. Applicants for membership of The Gabba will be notified in writing when a vacancy occurs and upon acceptance, the applicant is required to remit both the joining fee and annual subscription within fourteen (14) days of an offer, failing which the vacancy will be offered to the next person on the waiting list.

Please select from one of the following payment types:

I am paying the amount of \$ _____ Cash EFTPOS

Please charge my credit card the total amount of \$ _____ As payment for the waitlist application fee

Credit Card Type MasterCard VISA

Credit Card Details

Credit Card Expires /

Name on Card: _____

Signature of Card holder: _____

Date: _____

For GST purposes this document is deemed a Tax Invoice on Payment. All amounts are inclusive of 10% GST.

Referring Member: _____ Member Number: _____

Privacy notice: The Gabba is collecting this information for the purposes of membership registration. The information is only used for the purposes of keeping Members informed about future promotions, events and membership opportunities and renewals in accordance with the Membership Handbook

Office Use Only

Date Application Received: _____

Proposed Membership Number: _____

Deposit Taken: _____

Date Membership Processed: _____

Receipt Sent to Applicant: _____

Confirmation Sent to Member: _____