



Burnside Beefsteak and Burgundy Club Inc.

APPLICATION FOR MEMBERSHIP

Family Name: Given Names:

Date of Birth: First name for Function Badge:

Partner's name: Who will/will not* normally attend functions with me

Date of Birth: First name for Function Badge:

Personal details: (* *strike out that which does not apply*)

Address: Tel:

..... Fax:.....

Postcode: Mob:

Email:

Business details:

Address: Tel:

..... Fax:

Postcode:

I hereby apply for membership of the Burnside Beefsteak and Burgundy Club Inc. and agree to be bound by and comply with its Constitution, Rules and Bylaws as may apply from time to time and to pay all subscriptions, fees and charges as and when required.

Signed: Date:

SPONSORS DECLARATION

We believe this person is of good repute and hereby nominate him/her for membership of the Burnside Beefsteak and Burgundy Club Inc

Proposer: Signature: Date:

Seconder: Signature: Date:

Burnside Beefsteak and Burgundy Club use only

Date Application received: Date submitted to Committee:

Membership application: Accepted/Declined Class: Ordinary/Provisional

Date Applicant advised: Secretary/Membership Officer: