





East's Leagues Club

Just havin'  a great time!

Langlands Park, Main Avenue, Coorparoo Q 4151 ABN: 30 009 928 518

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-  (07) 3847 2158
-  reception@eastslagues.com.au
-  www.eastslagues.com.au
-  P.O. Box 1160 Coorparoo D.C. QLD 4151

Join today for only... **\$2**

All memberships run for the duration of the financial year - July 1st to June 30th

Title: Mr / Mrs / Miss / Ms **GOVERNMENT ISSUED PHOTO I.D IS REQUIRED TO JOIN.**
 (ONLY Drivers Licence, Learners Permit, Passport, 18+ Card, Victorian Keypass)

Given Names _____ Surname _____

Residential Address _____

Suburb

Postcode

Postal Address (If same write "As Above") _____

Suburb

Postcode

Date of Birth (Proof of I.D & Age Required) / /

Home Phone _____

Mobile* _____ *Required to receive exclusive SMS promotion notifications & birthday cash draw reminders.

Email Address _____

Do you wish to receive your birthday card with nearly \$25 worth of value in the mail along with other mail-outs? YES NO

Do you wish to receive the club's annual report? YES NO

Would you like to receive News Updates from our Easts Tigers Football Club? YES NO

East's Leagues Club Limited is committed to the privacy of your personal information supplied on this form under the Queensland Club Industry Privacy Code. The Club will use the information to process your membership application and to provide its facilities and services to you. The Club may use your personal information for marketing purposes, which may include sending you promotional materials and offers from the Club. Your information is not passed on to third party marketing companies. Please tick the appropriate box if you do not wish to receive any promotional materials or offers. By supplying your email address you agree to receiving promotional material and notifications of upcoming events. By signing this form you agree to abide by the code of conduct and terms & conditions of membership.

Signature _____ Date / /

STAFF USE ONLY

Form of I.D: _____	Inputed by:	Updated by:	Standard <input type="checkbox"/>	Senior/Pensioner <input type="checkbox"/>
I.D Number: _____			Membership Number: _____	