



# CARLTON-PARKVILLE PROBUS INC

probuscarltonparkville@gmail.com

## APPLICATION FOR MEMBERSHIP

TITLE.....SURNAME: ..... GIVEN NAME: .....

DATE OF BIRTH: .....

RESIDENTIAL ADDRESS:.....

POSTAL ADDRESS (if different from the above):.....

LOCAL GOVERNMENT AREA (your Council): .....

EMAIL ADDRESS: .....

TELEPHONE (mobile preferred) .....

FORMER OCCUPATION: .....

DO YOU KNOW ANY CURRENT MEMBERS (IF SO PLEASE GIVE THEIR NAMES)

.....

WE CURRENTLY HAVE THE FOLLOWING INTEREST GROUPS:

Blues, Book Group, Bridge, Classical Music, Contemporary Music, Creative Arts, Current Affairs, Cycling, Footy Tipping, Friday Friends, Gardening, Grumpies, Movie Group, STEM (Technology & Society), Theatre, Travel and Walking.

PLEASE INDICATE IF ANY OF THESE ARE OF INTEREST:.....

IN CASE OF EMERGENCY, PLEASE CONTACT: .....

I HEREBY APPLY FOR MEMBERSHIP OF THE PROBUS CLUB OF CARLTON-PARKVILLE INC and

- I understand that the information provided in this application will be used to assess my application and maintain my membership; if any information is not provided, I understand that my application may not be processed.
- I understand that the Club publishes photographs of its members on its website, Facebook and in its Newsletter and I accept that the Club will imply that I have consented to the publication of such photographs.
- I agree to comply with the Constitution and with any Standing Resolutions of the Club;
- I acknowledge that the Club is a non-profit organisation run entirely by volunteers;
- I accept that the obligations of membership include a willingness to participate in Club activities and a preparedness to contribute to the management of the Club and/or the management of the Club's Activity Groups.
- I acknowledge that the Club has a policy requiring that if I attend an indoor or outdoor face-to-face activity as authorised by the committee that I am required to be fully vaccinated against Covid 19, as defined by the Government of Victoria.

SIGNATURE: ..... DATE:.....

PROPOSED BY: ..... SIGNED: .....

SECONDED BY: ..... SIGNED: .....

**This information will be retained and be treated as private and confidential by the Club. Details will be provided to other Club members, and to Probud South Pacific in line with the Club's reporting requirements. The information will not be used for any other purpose.**

DATE RECEIVED	APPROVED BY COMMITTEE	SUBSCRIPTION PAID
DATE OF ADMISSION	PSPL NOTIFIED	BADGE ORDERED