



**ROCKHAMPTON BRIDGE CLUB INC**

**Application for Membership**

Title	First Name	Surname
DOB	(Year not required)	
Address		
Phone	Email	
Emergency Contact person		Phone
Are you a current or past member of an affiliated bridge club?		
NO		
Yes	Club Name	ABF number if known
Transferring to Rockhampton Bridge club?		
YES		
NO Associate Membership retaining current club as Home club for ABF purposes		

I hereby apply for membership of the Rockhampton Bridge Club Inc, and agree to be bound by its rules. I acknowledge that pursuant to the Associations Incorporation Act 1981, the Club carries public liability insurance cover of \$20 million. I understand that the Management Committee is required to maintain a Register recording the names and addresses of all Members. I also acknowledge that my name and phone number will appear in the Annual Program Book that is made available for members and associated clubs (unless instructed not to do so)

Signature

Date

Proposed by:	Signature	Date
Seconded by:	Signature	Date

Fees Paid

\$

Cash/ Cheque/ Direct Debit BSB 813049 A/C No 10023968



## ANNUAL SUBSCRIPTION FEE GUIDE

### NEW MEMBER SUBSCRIPTION

1 <sup>st</sup> January to 30 <sup>th</sup> June	1 <sup>st</sup> July to 30 <sup>th</sup> September	1 <sup>st</sup> October to 31 <sup>st</sup> December
ABF 16.10	ABF 16.10	ABF 8.05
QBA 16.10	QBA 16.10	QBA 8.05
RBC 27.80	RBC 27.80	RBC 0
Total \$60	Total \$60	Total \$16.10
	**New Members post lessons ** \$20	

### Re ACTIVATION SUBSCRIPTION

1 <sup>st</sup> January to 30 <sup>th</sup> June	1 <sup>st</sup> July to 30 <sup>th</sup> September	1 <sup>st</sup> October to 31 <sup>st</sup> December
ABF 16.20	ABF 16.20	ABF 8.05
QBA 16.20	QBA 16.20	QBA 8.05
RBC 27.80	RBC 2.80	RBC 6.40
Total \$60	Total \$35	Total \$22.50

### ASSOCIATE MEMBERSHIP

22/9/2020 to 31st December 2020	
RBC	\$10

#### Office use only:

Process for received application

Treasurer	Amount paid \$	Receipt No	Date	Initial
Secretary	Displayed on notice board	Date		Initial
	Committee Meeting	Date	Approved yes/no	Initial
Masterpoint Secretary	ABF No	Date		Initial
Secretary	Welcome letter/email	Date		Initial
	Information added to data base	Date		Initial
	Check correct processing file application	Date		Initial