

WONTHAGGI WORKMENS CLUB

SOCIAL \$5 MEMBERSHIP APPLICATION

(PLEASE PRINT CLEARLY)

Title First Name

Surname

Address

..... Post Code

Phone Number Mobile Number

Email

Date of Birth

Signature

RECEIVED BY

RECEIPT NUMBER

SOCIAL MEMBERSHIP IS \$5.00

PLEASE REMEMBER TO GIVE CUSTOMER A \$5.00 BISTRO / DRINK VOUCHER
THIS CAN BE REDEEMED ANYWHERE IN VENUE

MEMBERS NUMBER

DATE