



PENSHURST RSL TRAVEL CLUB Inc
MEMBERSHIP RENEWAL - 2023/2024
(COVERS 1 JULY 2023 TO 30 JUNE 2024) USE CAPITAL LETTERS PLEASE

Travel Club
Member No:

SURNAME: Mr/Mrs/Ms/Other: _____ FIRST NAME: _____

ADDRESS: _____

SUBURB: _____ P/CODE: _____ TEL: _____

MOBILE: _____ E-MAIL: _____

(PLEASE PRINT VERY CLEARLY)

EMERGENCY CONTACT NAME and TEL NO: _____

SPECIAL DIETARY REQUIREMENTS: _____

You **MUST** be a financial member of the Peshurst RSL Club Co-op. RSL Membership No: _____

I agree to abide by the Conditions and By-Laws of the Travel Club and the Club Co-op.

DATE: ____ / ____ / 202__

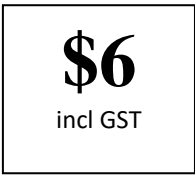
(SIGNATURE)

This section to be retained by the Member, after being completed by the Peshurst RSL Travel Club Inc
1/7/2023 – 30/6/2024

MEMBER'S NAME: _____

Travel Club
Member No:

RECEIVED BY: _____ DATE: ____ / ____ / 202__



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