THE RETURNED & SERVICES LEAGUE OF AUSTRALIA LTD

ABNs:

 National:
 63 008 488 097

 QLD:
 799 026 1713

 VIC:
 739 417 653 64

 ACT:
 612 683 626 46
 NSW:
 783 681 138 161

 SA:
 192 197 969 04
 TAS:
 119 770 931 23

 WA:
 592 631 721 84





Application for Service Membership (Pro-Rata)

HEREBY APPLY to be admitted as a Service Member of the League and a member of the				Sub-Branch		
in the	eRegion of the			State Branch.		
PERSONAL DETAILS						
Surname:	urname: Mr/Mrs/Miss/Ms/Rank:					
	ian/Given Names: Nee (Maiden Name):					
	/ Country of Birth					
	:) ()					
	Fax: (
SERVICE DETAILS						
Branch of Service: ☐ Army ☐ Navy ☐ Air Force ☐ National Service ☐ Allied Forces ☐ Police ☐ Other:						
Branch of Service:	my in Navy in Air Force in Nati	orial Service Allied For	ces 🗆 Police 🗀 Other:	(Please specify)		
Type of Service: Regula	r / Reserve / Both (Please circle)	Last Unit:				
Service Number: Rank: Length of Service:						
Date of Enlistment:/ Still Serving or Discharge Date:/						
RSL Eligible Service (Use two digit code below):						
Honours/Awards/Decorations (Post Nominals)						
Campaign and Service N	Лedals:					
RSL Eligible Service Cod 01 World War 1 02 World War 2 03 BCOF (Japan) 04 Korea	05 Malayan Emergency06 Borneo Confrontation07 Vietnam08 Peacekeeping	11 Gulf War 12 National Service	15 Allied Ford 16 Rwanda	rve) 18 Iraq		
PREVIOUS MEMBERSHIP DETAILS						
Previous Membership: ((circle one if applicable) YES/NO	Date First Joined:	_// RSL I	Badge Number:		
Previous Member of:		Sub Branch of the		State Branch.		
DECLARATION AND AGREEMENT						
I DECLARE THAT (i) I have not been convicted of a criminal offence and do not have charges outstanding pertaining to a criminal offence. (ii) My application details are true and correct. (iii) I agree to uphold the Constitution of the League and its By-Laws.						
I ENCLOSE Cheque/cash for \$ being my current membership subscription.						
Signature of Applicant:			Date:/			
PRIVACY STATEMENT						
We will not use any of the information on this membership form without your specific permission in writing, other than to record you as a member of the League and will not pass that information to anyone outside the League. As per By-Law 12.						
Payment Details Annual membership \$40.00 is required with this form if navment before 30.			Please circle below	w if you require The Listening Post		
Annual membership \$40.00 is required with this form if payment before 30 June.Pro-rata payments apply after 30 June						
See over for current rates.			Yes	No		

Address for Correspondence:

PO Box 3023, East Perth WA 6892

Ph: (08) 9287 3705 **Fax:** (08) 9287 3732

Country Callers Only: 1800 259 799 Email: membership@rslwa.org.au

ADMINISTRATION						
Sub-Branch Secretary/Membership Officers are to ensure this form is completed in full						
Proof of membership eligibility has been sign admitted as a member. The applicant qualit doubt exists regarding an applicant's suitab for consideration)	nted and the Sub Branch considers the applic fies for membership in accordance with The	cant to be a fit and proper person to be RSL WA Branch Constitution. (Where any				
Signature of Authorised Officer						
Print name: Position:						
Date	Receipt Number	Amount Paid				
		\$				
□ COMPLIMENTARY MEMBERSHIP (1 Year if applicable)						
Financial Year	Date of overseas service: From:	Date of overseas service: To:				
	RSL BADGE NO:					

PRO-RATA PAYMENTS

July-September \$20.00 Oct-Dec \$40.00 - covers following year