



# SIGN UP FORM

PLEASE HAND THIS FORM IN TO RECEPTION STAFF

NAME MR/MRS/MISS/MS \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POSTCODE: \_\_\_\_\_ DOB: \_\_\_\_\_


MOBILE \*: \_\_\_\_\_ HOME PH: \_\_\_\_\_

EMAIL \*: \_\_\_\_\_

\* Note we require a valid email OR mobile number to activate your membership

OCCUPATION: \_\_\_\_\_

**MEMBERSHIP TYPE:**  SOCIAL MEMBERSHIP (\$50)  
 SOCIAL LOCAL (\$25) Postcodes 2022 / 2024 / 2026 only  
 SOCIAL GOLD (\$535) Includes unlimited pool & sauna entry. ←  
 NOTE: All social membership types are valid until 31st March 2020



Social Membership of Bondi Icebergs Club allows the member access to the Licensed Club. Members can sign in up to 6 guests.

Show your membership card on entry at the Club and at the bar / bistro to receive member's discounts.

Please note that discount is not available until 24 hours after your application has been processed and approved

I'M HAPPY TO BE CONTACTED VIA EMAIL: YES / NO

I'M HAPPY TO RECEIVE SMS FROM TIME TO TIME YES / NO

I WISH TO RECEIVE THE ANNUAL REPORT VIA (circle one): EMAIL / WEBSITE / MAIL

### APPLICATION DECLARATION

I have not been a member of the Bondi Icebergs Club in the last 12 months

I hereby certify that I am over eighteen (18) years of age.

I understand that Bondi Icebergs Club is subject to the provisions of the Privacy Act 1988.

The primary reason for the collection of this information is so that the Club can from time to time communicate with me, using information supplied on this application form. I understand I can opt out of communications at any time and that I can access information relating to my membership by contacting the reception staff.

I will faithfully observe all rules and by-laws and I understand the Constitution of the Club.

I request that you enter my name on the Register of Members as a member, and I agree to be bound by The Memorandum and Articles of Association.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

CREDIT CARD PAYMENT - Please note a 2.0% surcharge applies to all credit card payments  
 CIRCLE ONE: MASTERCARD / VISA / AMEX / EFTPOS / CASH

OFFICE USE ONLY: MEMBER # \_\_\_\_\_

RECEIPT # \_\_\_\_\_ CASHIER \_\_\_\_\_ ID TYPE \_\_\_\_\_ ID # \_\_\_\_\_

# Celebrating 90 years