Probus Membership Application Form – Australia

Club Name:_____ Club Number:_____

I hereby apply for membership of_____

Title: _____ Surname:_____ Given Names: _____

Preferred Name: _____ Spouse/Partner Name:_____

Address:_____ Postcode:_____

Telephone:_____ Mobile:_____

Email Address:_____

Former Vocation:_____

Hobbies, Sporting & Other Interests:_____

Date of Birth _____ / _____ / _____ (optional)

In case of emergency, please contact:_____

Telephone:_____

- I agree to accept the Concept of Probus and to take an active role in both attendance and participation of this club.
- I understand that the information provided in this application will be used to assess my application and maintain my membership. If any information is not provided, I understand that my application may not be processed.
- I acknowledge that at some time during my membership, I may be called upon to take an active role on the Committee of Management.
- I consent to my name, address, telephone number and email address being included in a 'Directory of Members' to be distributed only to members of the Probus Club of _____ and not distributed or sold to outside agencies.
- I accept that the information provided in this application form will be used by Probus South Pacific Limited (PSPL) for inclusion in the PSPL Membership Database as a financial member of Probus and in line with the options provided below.
- I understand that I may access any personal information the Probus Club holds about me upon request.
- I understand that the Probus Club of _____ has Public Liability Cover of $20M through PSPL and that the club secretary can provide a copy of the Probus National Insurance Program.
- I understand that the Club publishes photographs of its members on its website and its newsletter to promote the Club and its events.
- I accept that the Club will imply that I have consented to the publication of such photographs unless I personally inform the Secretary in writing that I do not consent to such publication.
- I understand that by completing this declaration that it in no way restricts or limits the insurance cover available to me as a member/visitor through the Probus National Insurance Program whilst participating in a 'recognised activity' of the club.

Applicant Signature_____ **Date:**_____

Proposed By:_____ **Signature:**_____ **Date:**_____

Proposed By:_____ **Signature:**_____ **Date:**_____

PLEASE TICK [✓]

OPT IN [ ] I agree to provide PSPL with all my personal details in accordance with the Privacy Act of Australia and PSPL Privacy Policy and I would be interested in being invited to participate in Probus Surveys and Probus Focus Groups from time to time which I understand may assist in developing strategies to develop and strengthen the Probus organisation. **OR**

OPT OUT [ ] I agree to provide PSPL with all my personal details in accordance with the Privacy Act of Australia and PSPL Privacy Policy however, I would not be interested in being invited to participate in Probus Surveys and Probus Focus Groups.
I do not wish PSPL to hold all my contact details and I do not wish to be contacted by PSPL for any involvement in Probus Surveys and Probus Focus Groups.

CLUB USE ONLY Date Received:_____ Monies Received:_____
Considered at Committee Meeting held on:_____ Date of Admission:_____
Signature of Membership Officer: _____ Date:_____
Membership badge ordered: Letter of welcome & copy of Constitution sent:

A copy of the completed form to be sent to PSPL - E: admin@probussouthpacific.org
Issued by Probus South Pacific Limited ACN 152 374 395

The information collected on this form will be used in accordance with Probus South Pacific Limited Privacy Policy and the Privacy Act of Australia.