Service & Affiliate Membership Application Form

Service – available to past or present serving members of the Australian Defence Force and Allied Armed Forces

Affiliate – available to relatives of a person who is or was eligible to be a Service Member of the League

– also available to members of the emergency services (police, fire brigade, CFA, ambulance and/or SES

Service / Affiliate Applicants are required to provide documentary evidence of service history.

N.B. All areas marked * must be completed.

OFFICE USE ONLY Date application approved: _____ Date entered _____

Membership no. _____ Badge no. _____ Date card issued _____

ALL APPLICANTS

*Sub-Branch joining: _____

*Membership Application: Service ☐ Affiliate ☐

*Title: Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other ☐

*First name: _____

*Middle Names: _____

*Last Name: _____

Preferred Name: _____

Post Nominals: (suffix) _____ MALE / FEMALE (Please circle) *Date of Birth: _____

Identification

Type	_____	ID Number	_____
Country	_____	State	_____
Expiry	_____	Date Verified	_____

*Postal Address:

Street: Line 1	_____
Street: Line 2	_____

Country _____ Post Code _____ City/Suburb _____

Residential Address: (As above if same as Postal Address)

Street: Line 1	_____
Street: Line 2	_____

Country _____ Post Code _____ City/Suburb _____

Telephone: Home ( ) _____ Business ( ) _____

Mobile _____ Fax _____

Email Address: _____

Preferred Contact Method Mail ☐ Email ☐ Phone ☐   Mufti Yes ☐ No ☐

Next of Kin details (optional): Name _____

Contact Number _____ Relationship _____

SUB-BRANCH

Proposed by (Service or Life Member only): _____

Seconded by (Service, Life or Affiliate): _____

Declaration and Agreement

I declare that: **1. the information provided is true and correct; 2. I agree to uphold the Constitution of the League and its By-Laws**

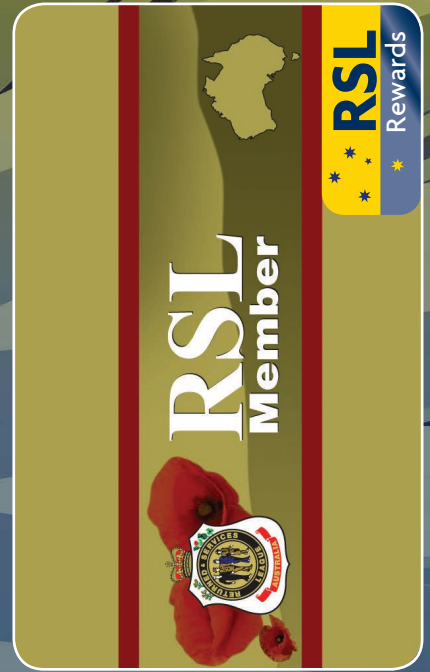Signature of Applicant: _____ Date _____

I wish to receive promotional materials regarding electronic gaming machines and related activities. Yes ☐ No ☐

Privacy Statement

The personal information provided on this membership form will be used in accordance with the privacy policy adopted by the Victorian Branch of the Returned & Services League of Australia. This Policy is freely available and can be accessed via the Victorian Branch website at www.rslvic.com.au or upon request.

SERVICE & AFFILIATE MEMBERSHIP

APPLICATION FORM

About the RSL

The RSL is an independent, apolitical organisation run by members, for members, primarily to assist current and former service men and women and their dependants when in need, whether they're RSL members or not.

Founded in 1916, as a direct result of the concern, compassion and mateship shown by the diggers for the welfare of their mates, the RSL exists to promote the well being and betterment of our members, serving and ex-serving men and women of the ADF and Allies and their dependants, with the provision of welfare and commemorative services, comradeship and, where appropriate, contribute to worthy objectives within the broader community.

Benefits Of RSL Membership

- A great way to contribute to the role of the RSL in support of Veterans, Service Personnel and your Local Community

- The opportunity to represent your Sub-Branch and volunteer throughout your community

- Member loyalty program and benefits

- Regular newsletters to keep you in touch with issues relevant to the RSL and its members

RSL —share the spirit of mateship

SERVICE APPLICANTS ONLY

Australian Defence Force ☐	Allied Armed Force ☐	Country _____

Service	Army ☐	Navy ☐	Air Force ☐	Merchant Navy ☐

Service Number _____ Current/Discharge Rank _____

Unit/Ship _____

Date Enlisted _____ Date Discharged _____

Service Awards _____ Service Locations _____

AFFILIATE APPLICANTS ONLY

Details of person who is or was eligible to be a Service Member of the League

Full name _____ Service details _____

Family relationship _____

*Six months service in the following: Police ☐ Fire Brigade ☐ CFA ☐ Ambulance ☐ SES ☐

(*Documentation supporting this service must accompany this application)