Application for Membership 2012

				•			PLEASE	PRINT CLEARLY
Establishe PO Box 55	d 1962 50 Coolangatta Qld	4225	Website	e: www.kirrasu	rfriders.cor	m.au		
	Jo Josiangana ana	.==5			7		Gender	Male or Female
Name						Membershi	p number	
Address								
DOB		Age			Do yo	ou hold a fire	st aid certifi	cate (Yes or No)
Phone		Mobile			Email			
Do you su	uffer from any medi	cal illnesse	s (if yes	give details)				
								I
			Doctor				Phone	
Brief s	surfing history							
Prev	rious club(s)							
							Have you r	esigned (Yes or No)
Spons	sors							
Memb	er who is nominatin	ng you				Signed		
			<u> </u>		Leng	th of aquair	ntance	(years)
Memb	er who is seconding	a vou			<u> </u>	Signed		<u> </u>
			<u> </u>		Leng	gth of aquaintance		(years)
Application	fee: Over/18 \$80.0	00 members	ship \$30	.00 18 and	d under app	lication fee:	\$30.00 me	mbership \$10.00
Application date:					Applica	Application fee paid date		
Division	[GROM U/13] [CAI	DET U/16]	[JUNIOR	U/20] [OPEN	MEN] [WC	OMEN] [SEN	NIOR MEN 0	/28] [MASTERS 0/40]
Boardshort size			T-9	shirt size]		
			ı		<u> </u>	1		
Note:	Note: Membership fees are due and payable by all members as at the 1st January each year							
ALL SECTIONS OF THIS APPLICATION FORM ARE TO BE COMPLETED								
I have read and will comply with the Surfing Queensland code of conduct and the above								

Applicants signature		Date	
----------------------	--	------	--