



Probus Club Membership Application Form

New Zealand

I hereby apply for membership for the Probus Club of _____ (the Club)

Title: _____ Surname: _____ Given Names: _____

Preferred Name on Badge: _____ Spouse/Partner Name: _____

Date of Birth ____/____/____ Email Address: _____

Address: _____ Postcode: _____

Landline: _____ Mobile: _____ Former Vocation: _____

Hobbies, Sporting & Other Interests: _____

In case of emergency, please contact: _____ Relationship: _____

Emergency Contact Telephone: _____ Mobile: _____

(The Emergency Contact person should not be a member of the Club)

1. I agree to be bound by the provisions of the Club's constitution, by-laws and/or standing resolutions and agree to take an active role in the Club through my attendance and participation.
2. I understand that the information provided in this application will be used to assess my application and maintain my membership. I understand that my application may not be processed if any of the above information is not provided.
3. I acknowledge that at some time during my membership, I may be called upon to take an active role on the Management Committee.
4. I consent to my name, address, telephone number and email address being included in the 'Directory of Members' to be distributed only to members of the Club.
5. I understand that I may access any personal information the Club holds about me upon request.
6. Unless advised otherwise in accordance with point 7 below, I consent to the information provided in this application form being provided to Probus South Pacific Limited (PSPL). I understand that this information may be used, held and disclosed by PSPL in accordance with the PSPL Privacy Policy which can be viewed at www.probusouthpacific.org or by clicking [here](#) (online access only). By signing this form, I acknowledge that I have read and agree to the terms of the PSPL Privacy Policy.
7. I understand that the minimum information required by PSPL is my first name and last name and that it is my responsibility to advise the Club Secretary in writing if I do not want PSPL to hold any of the additional information in this application form or I do not wish to be contacted by PSPL.
8. I understand that PSPL's National Insurance Program provides Public Liability Insurance of \$10 million and that I can access a summary of this coverage through the Club Secretary or the PSPL website.
9. I understand that the Club and/or PSPL may publish photographs or videos of members on their websites, in newsletters and on social media to promote the Club and Probus generally. By signing this application form, I consent to the publication of such photographs and videos unless I have advised the Club Secretary in writing that I do not consent to such publication.

Applicant's Signature: _____ Date: _____

Sponsored by*: _____ Signature: _____ Date: _____

Sponsored by*: _____ Signature: _____ Date: _____

* MEMBERSHIP APPLICATIONS MUST BE SPONSORED BY TWO FINANCIAL MEMBERS OF THE CLUB. FOUNDATION MEMBERS OF NEW CLUBS DO NOT REQUIRE SPONSORS

FRANKLIN COMBINED PROBUS CLUB

BANK ACCOUNT DETAILS: ASB: 12-3023-0541946-00

CLUB USE ONLY Date Received: _____ Approved by Committee on: _____

Monies Received: _____ Membership badge ordered: _____

A copy of this completed form should be sent to PSPL at general@probusouthpacific.org