



# RETURNED & SERVICES LEAGUE OF AUSTRALIA

QUEENSLAND BRANCH

Please save, print and sign form before submitting

## MEMBERSHIP APPLICATION FORM

### PERSONAL DETAILS (required)

Title (Mr/Mrs/Miss):	Post Nominals:
First Name:	Middle Name:
Surname:	Preferred Name:
Country of Birth:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
DOB:	Maiden Name:
Address:	
Suburb:	Postcode:
State:	Country:
Phone:	Mobile:
Email:	

### POSTAL ADDRESS

Same as above address

Address:

Suburb: Postcode:

State: Country:

### NEXT OF KIN

First Name:	Surname:
Relationship:	Phone:
Address:	
Suburb:	Postcode:
State:	Country:

### SERVICE HISTORY (required for Service Membership)

Branch of Service:  Army  Navy  Air Force

Allied  Other

Service Number:	Length of Service:
Enlistment Date:	Discharge Date:
Rank:	Unit:

Currently Serving in QLD?  Yes  No

*ADF members currently serving in QLD are entitled to free membership.*

### THEATRES OF SERVICE

<input type="checkbox"/> World War 2	<input type="checkbox"/> BCOF Japan	<input type="checkbox"/> Korea
<input type="checkbox"/> Borneo	<input type="checkbox"/> Vietnam	<input type="checkbox"/> Malayan Emergency
<input type="checkbox"/> Gulf War	<input type="checkbox"/> East Timor	<input type="checkbox"/> Iraq
<input type="checkbox"/> Afghanistan	<input type="checkbox"/> Peacekeeping	<input type="checkbox"/> <input type="text"/>
<input type="checkbox"/> Soloman Islands	<input type="checkbox"/> Other	<input type="checkbox"/> <input type="text"/>

### REFERRAL

How did you hear about RSL QLD?

Friend/Family  RSL Event  RSL Member

Google  Other

### PREVIOUS MEMBERSHIP

I have previously been a member of the RSL.

Member Number:

Sub Branch:

Date joined:  State:

### MEMBERSHIP

I apply to be admitted as a member of:

### SERVICE MEMBERSHIP (pick one)

Annual Fee	<input type="checkbox"/> \$20
Annual Fee (Currently Serving)	<input type="checkbox"/> \$0
Life Subscriber (18 - 39 yrs)	<input type="checkbox"/> \$300
Life Subscriber (40 - 44 yrs)	<input type="checkbox"/> \$260
Life Subscriber (45 - 49 yrs)	<input type="checkbox"/> \$220
Life Subscriber (50 - 54 yrs)	<input type="checkbox"/> \$180
Life Subscriber (55 - 59 yrs)	<input type="checkbox"/> \$140
Life Subscriber (60 - 64 yrs)	<input type="checkbox"/> \$120
Life Subscriber (65+ yrs)	<input type="checkbox"/> \$100

### CITIZEN'S AUXILIARY

Joining Fee	<input type="checkbox"/> \$5
Badge (optional)	<input type="checkbox"/> \$5
Junior (12 - 18 yrs)	<input type="checkbox"/> \$0

### WOMEN'S AUXILIARY

Joining Fee	<input type="checkbox"/> \$5
Badge (optional)	<input type="checkbox"/> \$5

### NON-LEAGUE

Social Member (see Sub Branch for fee amt.)

### I DECLARE

The information provided is true and correct.

I agree to the RSL Constitution and its By-Laws.

I enclose payment for the Membership selected.

### SIGNATURE:

### Privacy:

By becoming a Member, you agree to us collecting, storing, using, and protecting personal information in accordance with our Privacy Statement available at [www.rslqld.org](http://www.rslqld.org). Our Privacy Statement includes additional information about how we protect and manage personal information.

### OFFICE USE ONLY

Sub Branch Secretary/ Membership Officers are to ensure this form is completed in full. I hereby confirm the Proof of Membership eligibility has been sighted and the applicant qualifies in accordance with RSL (Queensland Branch) rules.

Date:	Receipt Number:	Signature:
Sub Branch:	Name:	<input type="text"/>