



74 Cambridge Avenue Ashhurst P O Box 62 Ashhurst 4810 Phone 3268296

MEMBERSHIP APPLICATION

Membership Applications are invited from adults of all ages who are citizens or permanent residents of New Zealand or any other Commonwealth country.

Mr/Mrs/Miss/Ms.....

Address.....

Phone.....Mobile.....

Email.....

I,.....(Prospective member) agree to abide by the rules of the Ashhurst Memorial RSA Incorporated. The Ashhurst Memorial RSA Incorporated is non-secretarian and non-party political.

Membership is not open to any person who is also a member of any party, organisation, association or other body whose allegiances or objectives are inconsistent with those of the RSA movement. It is a prerequisite that members of the Ashhurst Memorial RSA Incorporated be of good standing and believe in the ideals of the RSA movement.

Membership is:

- Returned Service Personnel – Service Number.....
- Service Personnel including NZ Police – Service Number.....
- Associate

.....
Signed by prospective member Date

We.....(Proposer) and

.....(Seconder)

Nominate as a member of the **Ashhurst memorial RSA Incorporated.**

.....
Approved/Declined RSA Executive Date

Office Use Only

Date Paid		Membership No.		Receipt No.	
Date Approved		Date Issued		Date Entered in system	