



APPLICATION FOR SERVICE MEMBERSHIP

Personal Details

Mr / Mrs / Miss / Ms _____ / _____ / _____
First Name Middle Name Surname

_____ / _____ / _____
Preferred Name Maiden Name Post Nominals

Date of Birth _____ **Country of Birth** _____

Gender Male Female Non-binary **Email Address** _____

Mobile Number _____ **Secondary Number** _____

Residential Address _____

Suburb _____ **State** _____ **Postcode** _____

Mailing Address *if different to Residential* _____

Suburb _____ **State** _____ **Postcode** _____

Emergency Contact Details

A friend or family member who we can contact in the unlikely event of an emergency, or if we can't reach you

Full Name _____ **Relationship to Applicant** _____

Email Address _____ **Phone Number** _____

Service Details

Branch of Service Army Navy Air Force **Service Number / PMKeyS** _____

Country of Service _____ **Rank** _____

Units of Service _____

Date of Enlistment _____ **Date of Discharge** _____ **or** **Currently Serving**

Conflict / Theatre Served	Date from	Date to

As per RSLWA Constitution (By-Law 3.6), documentary evidence of service is required in order to process applications for Service Membership & a copy of this must be submitted alongside your application. Proof of service must contain your full name & service number. Accepted categories are listed below, please tick whichever applies to you:

- Department of Defence issued certificates (Enlistment, Discharge, Etc.)
- Department of Defence issued Service Records
- DVA Veterans Cards (White, Gold, Orange)

If your proof of service does not fall into any of the above categories, please contact our State Membership Department to verify its suitability.



RSLWA

ABN: 59 263 172 184
 PO Box Z5424 St Georges Terrace, Perth WA 6831
 ANZAC House Veteran Central
 28 St Georges Terrace, Perth WA 6000
 (08) 9287 3799
membership@rslwa.org.au

Previous RSL Membership

Have you ever been a member of an RSL in Australia? *If yes, please provide details below* Yes No

State Branch _____ **Sub-Branch** _____

Current Financial Status _____ **RSL Badge Number** _____

RSLWA Communications & Privacy Statement

We will not use any of the information on this membership form without your specific permission in writing, other than to record you as a member of the League and will not pass that information to anyone outside the League, as per By-Law 12.

Do you wish to subscribe to the Listening Post? Yes, email a digital copy **or** Yes, post a print copy **or** No

Do you wish to receive information on RSLWA promotions & events? Yes No

ANZAC Club

RSLWA Service Members are entitled to full use & privileges of ANZAC Club at no further cost, for information please visit anzacclub.org.au

Do you wish to receive information on ANZAC Club promotions & events? Yes No

Declaration & Agreement

I declare that;

- I have not been convicted of a criminal offence and do not have charges outstanding pertaining to a criminal offence, and;
- My application details are true and correct, and;
- I agree to uphold the Constitution of the League and its By-Laws, and;
- Application is hereby made for the issue of a Service Member Badge, and I understand the badge is not transferrable and will be returned should I cease to be a financial Service Member of the RSL.

I hereby apply to be admitted as a Service Member of the League at the _____ Sub-Branch

Name

Signature

Date

Payment Details

1 Year - **\$40** 3 Years - **\$120** 5 Years - **\$200** Donation (Optional) \$ _____

Electronic Funds Transfer

Account Name: RSLWA
 BSB: 633 000 Account: 178 467 437
 Reference: Service Number & Surname

Cheque

Make payable to RSLWA & submit with completed application form & Proof of Service to RSLWA State Branch

Directly to Sub-Branch

Submit payment, completed application form & Proof of Service at the Sub-Branch you wish to join

Credit Card *Please specify* Visa Mastercard **Cardholder Name** _____

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Card Number

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Expiry

Sub-Branch Administration

Proof of Membership eligibility has been sighted & the Sub-Branch considers the applicant to be a fit & proper person to be admitted as a Member. The Applicant qualifies for Membership in accordance with The RSLWA Constitution.

Name

Signature

Date

State Branch Administration

Badge Number	Receipt Number	Financial Reference