



KNOX CLUB 2018/2019 SOCIAL MEMBERSHIP APPLICATION

Valid to 30/06/2019

TITLE:	FIRST NAME:	SURNAME	M <input type="checkbox"/>	F <input type="checkbox"/>
ADDRESS:				
		PCODE:	D.O.B. / /	
MOBILE:		HOME:		
EMERGENCY CONTACT:		CONTACT NO:		
EMAIL ADDRESS:				
ID NO: _____	Drivers Licence	Seniors Card	Medicare Card	ID Card

I wish to subscribe to the Knox Club email & sms offers and receive marketing material about the club's special offers including but not limited to entertainment, food and alcohol related offers.

YES NO If yes, preferred method: Email SMS

PLAYER REWARDS

I wish to receive communication including promotional materials, third party offers and offers that include alcohol or gaming related activities YES NO

Player Rewards (Gaming Machine Players only) Government Requirements

I agree to receive my Player Activity Statement in accordance with Government legislation (please tick one box only)

VIA MAIL VIA EMAIL FROM VENUE I have read, understood and accept the Privacy Policy's

If you tick "YES" you may receive gaming machine information & information relating to gaming related activities & alcohol.
If you tick "NO" you will not receive any promotional materials other than via the Diamond Rewards Kiosk



YourPlay gives you the power to track how much money and time you are spending as you play. You can also use YourPlay to set limits on the money and time you spend on gaming machines and to see your playing history online at any time. YourPlay can be added to your loyalty membership card and used on any gaming machine in Victoria. You can register for YourPlay at yourplay.com.au or ask a staff member for assistance.

I am over the age of 18 and have received, carefully read and understood the Rules of the program(s). I agree to strictly abide by these Rules, as amended from time to time and declare that the details in this Application are true and correct.

Signature _____ Date / /

KNOX CLUB SPONSORS THE FOLLOWING SPORTING CLUBS. PLEASE CIRCLE IF YOU ARE AFFILIATED WITH ANY OF THESE CLUBS

Bayswater FC	Boronia FC	Eastern Lions FC	Knox FC	Wantirna South FC
Scoresby FC	Eastern Ranges	Bayswater Bowls Club	Knox City Football Club	

I hereby declare that the above particulars are true and correct and I am over the age of 18 years, and if elected will agree to be bound by the rules and regulations of the Knox Club.

SIGNATURE OF APPLICANT: _____ DATE: _____

****The Knox Club Committee reserves the right to reject any application ****

OFFICE USE ONLY			
Membership No	Paid by	Taken by	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

KNOX CLUB

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