



NOMINATION FOR LIFE MEMBERSHIP

This form must be completed in full.

DETAILS OF NOMINEE:-

NAME: _____

ADDRESS: _____

PHONE: HOME: _____ WORK: _____ FAX: _____

REGISTERED CLUB: _____

DETAILS OF NOMINATOR:-

NAME: _____

ADDRESS: _____

_____ POSTCODE: _____

POSITION WITHIN CLUB: _____

PHONE: HOME: _____ WORK: _____ FAX: _____

SIGNATURE: _____

DATE: _____

DETAILS OF SECONDER:-

NAME: _____

ADDRESS: _____

_____ POSTCODE: _____

POSITION WITHIN CLUB: _____

PHONE: HOME: _____ WORK: _____ FAX: _____

SIGNATURE: _____

DATE: _____

N.B. This form is to be used for a Life Membership nomination only and must be accompanied by a Personal Profile Form.

Please return this form to: –

The Administration Officer
Redlands Softball Association Inc
PO Box 62
CLEVELAND Q 4163

Due Date: 9th November 2011



THIS FORM MUST BE ACCOMPANIED BY THE PERSONAL PROFILE FORM

PERSONAL PROFILE (LIFE MEMBERSHIP)

SURNAME: _____

GIVEN NAMES: _____

RESIDENTIAL ADDRESS: _____

POSTAL ADDRESS: _____

_____ POSTCODE: _____

PHONE: HOME: _____

BUSINESS: _____

FACSIMILE: _____

DATE OF BIRTH: _____

MAIDEN NAME: _____

(Where applicable)

PLACE OF BIRTH: _____

BIRTH COUNTRY: _____

OCCUPATION: _____

EMPLOYER: _____

CLUB: _____

DATE: _____

SERVICE TO RSA INC. _____

