

CAMP GREGORY A VETERANS RETREAT INC.

MEMBERSHIP FEE \$1.00 FOR LIFE

PLEASE COMPLETE IN BLOCK LETTERS

MEMBERSHIP APPLICATION / RENEWAL

PERSONAL INFORMATION

Name:		
Date of birth:	Mobile:	Home:
Residential address:		
City:	State:	Post Code:
Postal Address (only if different from above);		
Email:		

SERVICE INFORMATION

Service Number/PmKeys:	Service Type:
Enlistment Date:	Discharge Date:
If applicable - War Service/Operations and dates:	

Emergency Contact

Name:	Phone:
Address:	Post Code:
City:	

RELATIONSHIP:

SIGNATURE

I apply for membership to join Camp Gregory A Veterans Retreat Inc. (CGVR). I agree to abide by its Constitution, rules and regulations. By signing the document, I authorise CGVR to verify my stated Service or that of my partner or parent / child. I understand my details, as supplied on this form; will be kept on record by the CGVR.

Signature of applicant:

Date:

OFFICE USE ONLY

Proof of service sighted:	Membership Fee Paid:
Receipt Number:	Method of payment (Cash, cheque, etc.):
Signature:	Date:

ACCOUNT DETAILS

NAB
CAMP GREGORY VETERANS RETREAT INC
BSB : 084 571
ACCOUNT: 24 251 2252