

Join our Kidz Club!

Fill out your details below and hand your form in
to become a member of the Matamata RSA Kidz Club
(open to those 12 years and under)

First Name: _____

Last Name: _____

Date of Birth: _____

Please circle if you're a boy or girl: **BOY** **GIRL**

Address: _____

Town/City: _____ Post Code: _____

Email: _____

(mum's or dad's is fine!)

I agree to abide by Club rules and to play fair at all times:

Signed: _____ Date: _____

Parent / Guardian Info:

Name: _____

Membership Number: _____

The above applicant has my permission to apply for membership.

Signed: _____ Date: _____

