A picture containing shape

Description automatically generated**DESCENDANTS OF THE RATS OF TOBRUK AUSTRALIA ASSOCIATION Inc.**

**Membership Application**

**Please forward this application together with payment to:**

**The Secretary, DOTROTA, PO BOX 3389, Victoria Point West, Qld. 4165.**

**or email to:** [**dotrota41@gmail.com**](mailto:dotrota41@gmail.com)

Name: …………. …………………………………………………………………………… ………………………………………………………………………………..

Title Given Name (s) Surname

Address: …………………………………………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………….. …………………………… ………………………..

State Postcode

Email: …………………………………………………………………………………………………………….. Phone No: ………………………………….

Please Print Clearly

Are you over 18 years of age? **YES / NO** Are you, or have you been, a member of the military? **YES / NO**

Are you a descendant/relative of a Rat of Tobruk **YES or NO If yes please print Soldier’s details below:**

……………………………………………………………………………………………..… ……………………………………..…………………………………………

Given Name (s) Surname

……………………………………………….. …………………………………………………………………………………………. ………………………………………

Service No. Unit Date of Death

My relationship with the Soldier is: ……………………………………………………………………………………………………………………..………………

Reason for wanting to join: ………………………………………………………………………………………………………………………………………………….

**Payment Details:**

**Single:** $12 joining fee plus $10 annual subscription **Couples:** $20 joining fee plus $20 annual subscription

**Junior Rats up to 18yrs:** $7 joining fee plus $5 annual subscription.

Payment can be made by Cheque, EFTPOS, Credit Card, Money Order or Cash. For EFTPOS, please include a unique reference so that the payment can be matched to the application. e.g. ‘NEW MBR’ and your surname.

Bank Account Details: Account Name: DOTROTA BSB: 124-001 Account No.22920417

The EFT ‘reference’ I have used is: |N|E|W|M|B|R|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|

Payment by Credit Card:

Number |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_| Expiry Date ……/……./….... CVV……..

**Privacy Clause:** Information requested in this application form is necessary for the Association to determine your eligibility for membership, maintain the members register and to keep you informed about the Association, its activities and products. It will not be provided to third parties for direct marketing purposes. Your personal information will not be shared to other members without your permission.

**Promotional Photos:** At the Association’s functions, photos may be taken for promotional purposes and publication. By attending any of these functions you give permission for the use of your image in the manner described above.

**Association Subscription and Rules:** By joining the Association, you agree to pay the annual subscription as set by the Management Committee, when it falls due on the 1st July each year and to abide by the Association’s rules and policies as approved by the Management Committee from time to time. These are available on our Facebook page.

**Applicant’s signature:** ……………………………………………………………………………………… **Date:** ……………………….………………

**Membership Approval:** …………………………………………………………………………………… **Membership Number:** ……….……

Delegate of Committee Management