

APPLICATION FOR MEMBERSHIP

						DATE OF APPLICATION				
APPLICANT II	NFORMATIO	N					/] /	
Title:	Gender:	Male	Female	Prefer not to say	DOB:		/] /	
Given name/s:				Surname:						
Email Address:				Phone number:						
Address :										
Suburb:				Post Code:						
Please tick the appr number if applicabl		ovide mem	bership	Please tick the appr details if applicable	_	box and	provid	e addi	tion	al
MCC Member:	MCC Membership N	o.		Are you a current re	gular cri	icketer?				
Waiting List: If you no longer play	MCC File number: y, would you be int	erested in;		If yes, what Club and Grade?						
Umpiring:	Yes No			If no, what past Club Grades?	s and					
Team Managing: Yes No APPLICATION FOR MEMBERSHIP				Primary skill (e.g. ba						
I hereby make	e application to joir	the XXIX	_	ree to make payment al subscription fee o		Signa	ture:			
I am a financial member of the Melbourne Cricket Clu			Cricket Club	OR am on the Waiti	ng List	Date:				
I agree, if elec	eted, to be bound by	y the rules	and regulation	ons of the MCC XXIX	Club					
PROPOSER A	ND SECOND	ΕR								
Proposer Name:		Seconder Name:			Complete should be			on fo	rms	
						By email to:				
Signature:		Sig	Signature:			Daniel Howe danielh@mcc.org.au				
						By post	to:			
Date:		Dat	e:			Attn: Mo Melbour PO BOX East Me	rne Cri 175	icket (Club	02

If you have any questions about this form, you may contact Daniel Howe on 0419 858 142 or danielh@mcc.org.au

