

## **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 appronumber if applicabl		ovide mem	bership	Please tick the appr details if applicable	_	box and	provid	e addi	tiona	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	FRSHIP		Primary skill (e.g. ba	tter)?					
I hereby make	e application to join	the XXIX	_	ree to make payment al subscription fee o		Signa	ture:			
I am a <b>financi</b>	al member of the M	Melbourne	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 AI	ND SECONDI	<b>ER</b>								
Proposer Name:		Seconder Name:			Complete should be			on fo	orms	
		560	onder wan			By email to:				
Signature:		Sig	Signature:			Braden Tuohey bradent@mcc.org.au				
						By post	to:			
Date:		Dat	e:			Attn: Mo Melbour PO BOX East Me	rne Cri 175	cket (	Club	02

If you have any questions about this form, you may contact Braden Tuohey on 0427 440 401 or bradent@mcc.org.au

