



MUS CLUB MEMBERSHIP FORM 2012

Club Name: Melbourne University Water Polo Club

MEMBER DETAILS

Name: Mr Mrs Miss Ms Dr Prof.

Given name: _____ **Family name:** _____

Postal Address _____
Suburb _____ **Postcode:** _____

Phone mobile: _____ **Home:** _____ **Business:** _____

DOB: _____ **Email:** _____

MUS is committed to observing the requirements of the Information Privacy Act. We collect your information for the purpose of providing your access to our sporting facilities and services, and it is also retained for the development of a Sports Alumni at the University of Melbourne. By completing this form you consent to MUS using your information for these purposes. If, in the future you decline to be involved in the MUS sports alumni, you can so advise MUS. You can also contact MUS for a copy of the MUS Privacy Policy, or obtain a copy from www.sports.unimelb.edu.au

ELIGIBILITY

Please tick one of the eligibility criteria and fill in ALL relevant details:

<input type="checkbox"/>	University of Melbourne Student	Student No. _____
		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Postgraduate
<input type="checkbox"/>	University of Melbourne Staff / Contractor	Staff / Contractor No. _____
<input type="checkbox"/>	University of Melbourne Alumni	Student No. _____
		& / or Course: _____
<input type="checkbox"/>	Student / Graduate or another University	
<input type="checkbox"/>	Other	

MEMBERSHIP

Membership Type Non UM Student **Club Membership Fee:** \$90.00

I agree to abide by the rules and regulations pertaining at all times to the use of the University Sports facilities, services and equipment

Signed: _____

Date: _____

Signed Parent / Guardian _____
(where applicable)

Date: _____

MUS OFFICE USE ONLY

Card No. _____

Processed by: _____

Date: _____