

WAITLIST APPLICATION FORM SCG MEMBERSHIP



Nomination fee of \$50 must accompany application

Please return form to: Membership Services – GPO Box 150, Sydney NSW 2001

Phone: 1800 80 11 55 **Fax:** 02 9380 0398

Website: sydneycricketground.com.au **Email:** membership@scgt.nsw.gov.au

DECLARATION

I, _____
(Title) (First Name) (Surname)

hereby make application for admission to membership of the Sydney Cricket Ground.

If elected I agree to abide by the By-Laws of the Sydney Cricket & Sports Ground Trust. I understand it is my responsibility to advise of any change of status to this form.

Address _____ Postcode _____

Date of Birth _____ Phone (W) _____ (Mob) _____

(H) _____ (Fax) _____ Occupation _____

Email _____

Signature _____ Date _____
(or guardian if unable to sign)

WHAT ARE YOUR SPORTING INTERESTS? (please tick)

Cricket	<input type="checkbox"/>	AFL	<input type="checkbox"/>	Other, please state	<input type="checkbox"/>
Rugby League	<input type="checkbox"/>	Soccer	<input type="checkbox"/>	_____	
Rugby Union	<input type="checkbox"/>	Concerts	<input type="checkbox"/>		

CREDIT CARD DETAILS

Card Type: _____ Card Number: _____

Expiry Date: _____ CVC Number (3-digit security code): _____

Signature _____ Date: _____

NOTE

This application will be acknowledged in writing by the Trust upon acceptance to the SCG waiting list.

It is important to retain the acknowledgement pending election to membership.

This application must be accompanied by a nomination fee of \$50 (incl.GST).

Please ensure your contact details are updated regularly so that we are able to provide you with important information.

..... OFFICE USE ONLY

Waitlist Number:

Date Received:

Entered By: