

Australian Scrabble Players Association (Vic) Inc Application for Membership

Title First Name	Last Name
Email	
Mailing address (if getting magazine by po	st):
Mobile Phone	Home Phone
Club at which you usually play	
` ,	Inc; and by submitting this application I agree that I support the purposes of the Model Rules of the Association (available on <i>Scrabble Victoria</i> website details below)
Signed	Date
purposes: • Providing and improving our services, e.g. your information for marketing and promote. • Compliance with legal obligations: In the governing the Association, your contact dekeep your contact details private, please p. We take reasonable steps to protect your phave the right to access your personal informarketing materials. If you have any quest please contact us. Magazine -	g. event and meeting notices, distribution of our magazine. We may use ional purposes, i.e. photos. event it is required by the Consumer Affairs Victoria under the legislation etails may be made available to other members upon request. If you wish to provide a reason to the Membership Officer. personal information from unauthorized access, use, or disclosure. You permation, request that it be corrected or deleted, and opt out of receiving tions or concerns about how we collect and use your personal information,
By email only	Post only
Fees - Members - \$25 paid yearly to 30 June in a	dvance.
Associate Members – Free • An Associate Member is a member) • Associate Members do not have v	er who is under 18 years of age on or before 1 July (Date of Birth is required roting rights.
Please complete this application and pay e In person Direct Deposit (Account Details be ASPA (VIC) INC Westpac BSB 033 050 Account No. 278917 Please add a suitable narration wh deposit to Membership Officer at ce	elow) - PREFERRED nen transferring online (for reconciliation purposes) and email details of
Association Use Only:	
Application accepted: YES / NO Committee Member's Signature:	Date