



# Application for Life Subscription

(To be completed in full by **NEW MEMBERS**)

I HEREBY APPLY to be admitted as a Service Member of the League and a member of the \_\_\_\_\_ Sub-Branch in the \_\_\_\_\_ District of the \_\_\_\_\_ State Branch.

## PERSONAL DETAILS

Mr/Mrs/Ms/Rank: \_\_\_\_\_ Surname: \_\_\_\_\_ Christian/Given Names: \_\_\_\_\_  
Male/Female: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Country of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ State/Country: \_\_\_\_\_  
Phone (inc STD): (W) (\_\_\_\_) (H) (\_\_\_\_)  
Mobile: \_\_\_\_\_ Fax: (\_\_\_\_) E-mail: \_\_\_\_\_  
Next of Kin: Surname: \_\_\_\_\_ Christian/Given Names: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ State/Country: \_\_\_\_\_  
Contact Number: Ph: (\_\_\_\_) Mobile: \_\_\_\_\_  
Honours/Awards/Decorations (Post Nominals) \_\_\_\_\_

## SERVICE DETAILS

Service Number: \_\_\_\_\_ Branch of Service: \_\_\_\_\_  
Army / Navy / Air Force / National Service / Allied Forces  
Type of Service: Regular / Reserve / Both (Please circle) Last Unit: \_\_\_\_\_  
Length of Service: \_\_\_\_\_ Date of Enlistment: \_\_\_\_/\_\_\_\_/\_\_\_\_ Discharge Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
RSL Eligible Service (Use two digit code below): \_\_\_\_\_  
RAS Badge Number: \_\_\_\_\_  
Campaign and Service Medals: \_\_\_\_\_

### RSL Eligible Service Codes:

01 World War 1	05 Malayan Emergency	09 Other	13 ADF (Regular)	17 Afghanistan
02 World War 2	06 Borneo Confrontation	10 East Timor	14 ADF (Reserve)	18 IRAQ
03 BCOF (Japan)	07 Vietnam	11 Gulf War	15 Allied Forces	19 Solomon Islands
04 Korea	08 Peacekeeping	12 National Service	16 Rwanda	20 To be used

## PREVIOUS MEMBERSHIP DETAILS

Previous Membership: (circle one if applicable) **YES/NO** Date First Joined: \_\_\_\_\_ Previous Badge Number: \_\_\_\_\_  
Previous Member of: \_\_\_\_\_ Sub-Branch of the \_\_\_\_\_ State Branch.

## DECLARATION AND AGREEMENT

I DECLARE THAT (i) the above information is true and correct.  
(ii) I agree to uphold the Constitution of the League and its By-Laws.

I ENCLOSE Cheque/cash for \$..... being my current membership subscription.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## PRIVACY STATEMENT

We will not use any of the information on this membership form without your specific permission in writing, other than to record you as a member of the League and will not pass that information to anyone outside the League.

PLEASE CONTINUE OVER PAGE

Rewrite - 2005

# Application for Life Subscription (cont.)

**ANNEX B TO MMA  
SECTION FOUR**

**Member to complete**

<b>OTHER DETAILS – Optional (for statistical purposes only)</b>			
In Receipt of Dept of Veterans Affairs Pension? (Tick One)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	DVA File No:  _____
Type of Pension Above (Tick One if applicable)	Service <input type="checkbox"/>	Disability <input type="checkbox"/>	War Widow(er) <input type="checkbox"/>
In Receipt of Defence Force Pension? (tick one)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Employment - Currently (Tick One):	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Retired <input type="checkbox"/> Disabled <input type="checkbox"/> Unemployed <input type="checkbox"/>

<b>SUB-BRANCH ADMINISTRATION</b>			
<b><u>Sub-Branch Secretary/Membership Officers are to ensure this form is completed in full.</u></b>			
Sub-Branch Decision: _____			
I hereby confirm that proof of membership eligibility has been sighted and the applicant qualifies in accordance with RSL (Qld Branch) Rules.			
Secretary/Membership Officer: _____ Date: ____/____/20____			
<b>DATE</b>	<b>AMOUNT PAID TO SUB-BRANCH</b>	<b>RECEIPT NO.</b>	<b>AMOUNT FORWARDED TO STATE BRANCH**</b>
** Refer to Section Four of the Manual of Membership Administration (MMA) for cost listing.			

<b>STATE BRANCH ADMINISTRATION</b>		
Date Application Processed:	<b>QLD MEMBER NO:</b>  _____	<b>RSL BADGE NO:</b>  _____