



**Queensland Police Service
Rugby League Association Inc.**
Est. 1998



Application for Financial Membership

*Please print this form out,
complete in full, sign and
post to:-*

**To - Wayne Rasmussen
P O Box 685
Bulimba 4171**

Office Use
Approved:
M'ship No:

Details of Applicant

I, _____, of _____
(Insert full name) (Insert full home address)

Employee Number: _____ Rank/Designation: _____

Station/Section: _____ Date of Birth: _____

Contact Details

Wk Ph: _____ Mob: _____ Hm Ph: _____

Internal E-mail: _____ Hm E-mail: _____

hereby make application for membership of the Queensland Police Service Rugby League Association.

Membership (\$5 per fortnight)

I agree to abide by the Association Rules and By-Laws as set down by the Association and the Queensland Police Services' Code of Conduct. This membership remains in force and current until I withdraw my membership in writing to the Association or until the Executive of the Association withdraws this privilege. I am aware that the Executive of the Association has the right to grant or refuse this application.

(Applicants Signature) Dated: _____ | _____ | 200____
Day Month Year

To:	Personnel Services GPO Box 1440 Brisbane Qld 4001 Fax: (07) 3364 6501 Tel: (07) 3364 6770	Qld Police Service Rugby League Association <i>Payroll Deduction Authority</i>
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Please commence deductions of: \$5.00 Membership

per fortnight to the following financial institution:-

Bank: Qld Police Credit Union **Branch:** 231 North Quay, Brisbane
BSB: 704-052 **Account No:** 1016662
Account Name: QPSRLA - Membership Account
Region/Command/Division: _____
(Insert your Payroll Region/Command)

Employee Number	Full Name	Signature
_____	_____	_____

Region/Command Use Only	HRM Branch Use Only	
Checked By:	Date Processed:	Entered By:
Date:	Fortnight Ending:	Checked By: