RICHMOND-WAIMEA RETURNED SERVICES ASSOCIATION (INC)

Postal Address
PO Box 3183
Richmond 7050

President
RWRSA
John Llewellin
027 712 7247

President
Murchison RSA
Bill Thurlow
027 478 9470

Secretary/Treasurer
RWRSA
John D'Rose
027 288 9552

APPLICATION TO JOIN / TRANSFER

Full Name:

(Surname) *(Please Use Block Letters)* *(Christian Names)*

Rank: ***No:*** ***Unit:***

Army/Navy/Air Force/Other ***Returned/Service/Associate***

(Please delete what does not apply - two should remain)

Theatre of Qualifying Service:

Date of Birth: / / ***Pension Disability No:***

Date of Enlistment: / / ***Date of Discharge:*** / /

(If not known – year will suffice)

Postal Address:

Phone: ***Mobile:*** ***Email:***

Next of Kin: ***Relationship:***

Surname: ***Christian Names:***

Address:

(If different to above address)

Phone: ***Mobile:*** ***Email:***

Previous Address: *(If Transferring)*

Previous Branch/Assn:

I the undersigned agree on being accepted as a member of Richmond-Waimea RSA or Murchison RSA, to abide by all rules and By Laws imposed by the Association and further agree to promote the objects of the Returned Services Association Inc.

Signature:		***Date:***	
Fees: $30.00	***Payable with Application Form***	***Internet Banking: 03-0751-0183119-00***	

Secretary:		***Signature:***		***Date:***	
President:		***Signature:***		***Date:***	

Note: Proof of service *may* be asked for in this application, if unable to locate your Service Records, go to website: www.nzdf.mil.nz/nzdf/personnel-archives-and-medals/ and request a copy of your records.