



ROCS Membership

NAME:

BUSINESS NAME (if applicable):

ADDRESS:

PHONE:

EMAIL:

MEMBERSHIP PACKAGE INCLUDES:

- **ROCS Keyring - displaying season Fixture**
- **1 x Free beer, wine or softdrink at home games**
- **Regular updates on News & Events**
- **Annual General Meeting Voting rights**
- **Weekly Match Report and Club News sent in electronic version to all members.**

PAYMENT DETAILS:

Credit card: **MASTERCARD** **VISA**

Card holder name:

Card number:

Expiry date: __/__/__

Amount to be charged: \$50 (Membership)

EFT also available. ACCOUNT NAME: Rostrevor Old Collegians Football Club. BSB: 633 000 Acc. Number: 153994777

It is important you put your name or business name in the Reference section when paying by EFT.

Please scan and email your completed form to Bob Holland: rholland@lam.com.au or post to PO Box 6806 Halifax Street SA 5000 or cheque payable to Rostrevor Old Collegians Football Club.

Any questions about payment to Simon Emanuele on 0412 316 939.