



RUGBY LEAGUE MEMBERSHIP APPLICATION FORM

Name: _____

Badge: _____

Mobile: _____

Address: _____

Email: _____

Wyong Rugby League Player
Year/s _____

Wyong Rugby League Official
Juniors Year/s _____
Seniors Year/s _____

Preferred method of receiving official communications - AGM's, EGM's, Information sessions etc

Post Email
 Text None

If no box is selected we will assume you are to receive no communications

Preferred method of receiving renewals

Post Email
 Text None

If no box is selected we will assume you are to receive no communications

Preferred method of receiving Annual Report - always available to view on website

Post Email
 Text None

If no box is selected we will assume you are to receive no communications

If I'm currently opted out of emails and/or texts, I give the Club authority to remove me from the opt out list

Signature: _____