



**LITTLE TROOPERS CLUB
APPLICATION FORM**

Free to Join for Children under 13 years of age
Parent or Grandparent must be a current RSL member

NAME IN FULL:

Master Miss

First Name: _____ Surname: _____

ADDRESS:

Address 1: _____

Address 2: _____

Date of Birth: _____ Current Age: _____

PARENT / GRANDPARENT DETAILS:

Full Name: _____

Bendigo RSL Membership Number: _____

E-Mail: _____

Phone: _____

I hereby confirm that I am the parent or grandparent of the Little Troopers applicant, I accept full responsibility for the child in question and am happy to receive information and updates regarding the Little Troopers Club via email

Signature: _____ Date: _____

Relationship to Little Trooper: _____

KIDS ZONE RULES

- No Food
- No Drinks
- No Pushing
- No Fighting
- No Bullying
- No Yelling or Swearing

REASONS TO JOIN

- Free Drink Upon Sign up
- Free Birthday Meal
- School Holiday Activity Days
- Monthly competitions to go into the draw to win awesome prizes!!!

OFFICE USE ONLY

Date Processed: Welcome Letter Sent:

Membership No: Birthday Letter Sent:

Staff Name: