

**Retired OnLine Inc. NM11-12**  
**APPLICATION FOR MEMBERSHIP.**  
**( PLEASE PRINT ALL INFORMATION IN CAPITALS)**

Surname:.....Mr, Mrs, Ms, Miss. Given Name:.....Card Name

Address.....Suburb.....Postcode.....

Telephone:.....Mobile.....

Email: **(CAPITALS PLEASE)**.....

Do you own a computer?            Yes / No

Is it IBM compatible            Yes / No    Windows Version.....

Computer Skill - Nil.....Semi Skilled.....Skilled.....

Subscription Fee of \$15.00 is enclosed:    Yes / No

- **I am over 50 years of age and wish to apply for Full Membership.**
- **I am over 45 years of age and wish to apply for Associate Membership.**  
I agree to the above personal details being entered into a Membership Register.
- **I am over 30 years of age and wish to apply for Associate Membership.**  
I agree to the above personal details being entered into a membership Register.

Signed.....Date.....

Proposed by.....ROL Membership No:.....

Seconded by.....ROL Membership No:.....

Please return your application form with  
Cheque/Money order (no cash in mail)

**Office Use Only.**

If you wish your card posted to you, please  
include a stamped self addressed envelope.

**New Membership No:.....**

**Treasurers Receipt No:.....**

**To:**  
**The Treasurer,**  
**Retired OnLine Inc.**  
**P.O. Box 850,**  
**Elanora. Qld. 4221**

**Date.....**