



PINE RIVERS UNDERGROUND BREWING SOCIETY

## MEMBERSHIP APPLICATION FORM

### NAME DETAILS:

Mr  Mrs  Miss  Ms  Dr  Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### ADDRESS DETAILS:

Street Number: \_\_\_\_\_ Street Name: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

### CONTACT DETAILS:

Home Telephone: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### CURRENT BREWING HISTORY:

Tins  Extract  All Grain  Other: \_\_\_\_\_

Amateur Brewer / Commercial Brewer (circle one).

How long have you been brewing: \_\_\_\_\_ Brewing Interests: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I confirm and understand that:

- a) I am aged 18 or over
- b) All information supplied is true and correct
- c) By signing and submitting this form, I agree to abide by, and accept that my membership is subject to, the club rules and conditions of membership as and when published and made available, including the payment of club dues.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Office use only*

Club Dues Paid: \_\_\_\_\_ Date: \_\_\_\_\_

This application form and its contents are private and confidential for record keeping and administration purposes of P.U.B.S and not for public distribution or dissemination unless consented to or required by law.