



# Energy West Social Club

## Club Member Application Form – Annual Membership

I wish to join Energy West Social Club Inc. as a Club Member making paying an annual subscription. I agree EWSC may use my details below for their private use and member verification.

**If you are a current employee of Alinta, ATCO, DBNGP, Horizon, Synergy or Western Power who is pay directly by these companies then please use the Club Membership - Payroll Deduction Application Form to enable you to make fortnightly deductions. All other employees or contractor use this form**

**Please Provide the Following Details:**

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_

Mobile: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Personal Email: \_\_\_\_\_

This email address will be kept in our Members Register as your primary contact for formal communication. If you would prefer this to be your residential or postal address, please notify us on [feedback@energywest.com.au](mailto:feedback@energywest.com.au).

If you have been a previous EWSC member, please supply your previous EWSC member no? \_\_\_\_\_

How did you find out about Energy West Social Club? \_\_\_\_\_

---

**For current employees of eligible Energy Companies (other than those that provide payroll deductions for EWSC)**

I am currently employed at \_\_\_\_\_ (depot location): \_\_\_\_\_

Pay number/Employee ID: \_\_\_\_\_ (start date): \_\_\_\_\_

---

**For past EWSC members**

I was employed at \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

*(please attach a pay slip or proof of previous employment, showing Energy West Social Club Deductions).*

---

**For contractors of eligible Energy Companies (must have contracted for a minimum of 6 months)**

I am currently employed at \_\_\_\_\_ (depot location): \_\_\_\_\_

Supervisors Contact No: \_\_\_\_\_ (start date): \_\_\_\_\_

---

**For parents, spouse, de facto partner, sibling, child over 18 years of age of existing EWSC members (you may be asked for a form of ID that shows link to existing member ie. Birth Certificate, Marriage Certificate)**

Existing Member Name: \_\_\_\_\_

Member No: \_\_\_\_\_ Contact No: \_\_\_\_\_

---

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Subscriptions = \$165.00 annually** (Please call EWSC Office 08 9326 4076 so that we can process your credit card)

Please return this form via email. **Email:** [feedback@energywest.com.au](mailto:feedback@energywest.com.au) **Web:** [www.energywest.com.au](http://www.energywest.com.au)

Please list your family details to be invited to the Energy West Social Club Annual Event: *(Please attach a form of ID that shows link to joining member ie Medicare Card, Private Health Insurance Card, with member number blanked out)*

1. Partner name: \_\_\_\_\_

2. Child's Name: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_

3. Child's Name: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_

4. Child's Name: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_

5. Child's Name: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_

6. Child's Name: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_