



Mums & Bubs Club

Membership Application form

PLEASE PRINT CLEARLY

Mums Name: _____

Childs Name: _____

Home Address: _____

Suburb _____ Post Code _____

Phone: _____

Mobile: _____

Email address: _____ @ _____ . COM .

Childs D.O.B. _____ / _____ / _____ Childs Gender: M F

Are you a member of the VIP Club Y N

Would you like to receive information regarding the Deepwater Plaza Mums & Bubs Club, centre activities and events or retailer promotions activities and specials?

Y N

Card no

I understand that the information that I have provided will only be utilised for Deepwater Plaza Centre Management purposes. I also understand that I can cancel my Membership by simply returning my membership card to Centre Management office. I have read the Collection and Disclosure statement and know I have a choice regarding recording my details on a data base for marketing purposes. Your Childs details will not be passed on to a third party and will be kept confidential.

Signature

Date