

# Application for Membership Rockhampton 60 & Better Program Inc

“Rockhampton 60 & Better Program Inc” welcomes your application for membership. Rockhampton 60 & Better Program Inc. abides by our Code of Conduct, our Rights and Responsibilities, Privacy/Confidentiality & Complaints policies. Where possible all activities have disabled access and facilities. Your application form will be destroyed when you are no longer a Member of the association.

**Client Charter**

*Rockhampton 60 & Better Program INC aims to enable older people at a local community level to participate in informed decision and activities that positively affect their health and well-being.*

**Name of Applicant** ..... **Gender**  F  M

**(Signature)**..... **Phone**.....

**Address** ..... **P/C**.....

**Emergency contact name**..... **Phone**.....

**Age (please tick)**     50-60     60-70     70-75     75-85     85over

**Existing member**            **New member**            **Returning member**

**Aboriginal &/or Torres Strait Islander Origin?**    **Yes**     **No**

**Do you have a Multi-Cultural Background?**    **Yes**     **No**

Privacy Notice: I understand that information collected is for the purpose of data collection for the Rockhampton 60 & Better Program. Also reporting to the Queensland Government as required. Any personal information that is used to report to the Queensland Government will be de-identified and none of this personal information will be shared with any other party without my knowledge. Also that I can request access to the information kept about me at any time.

**Are there any topics you would like information on? For example: (please tick)**

Social activities  health  housing  transport  improving physical mobility

Home assistance  Other (please indicate).....

**What activities are you interested in?** .....

**Are there any health issues you would like us to know about?** .....

.....

**Rockhampton 60 & Better Program Inc Contact Details**

**Postal:**    PO Box 211  
                  Rockhampton QLD 4700

**Physical:**  
2/48 Quay Street  
Rockhampton 4700  
QLD 4700

**Phone**    49140065 mobile 0437398990

**Email:**    [better60inc@optusnet.com.au](mailto:better60inc@optusnet.com.au)

*Sighted the Management Committee/Manager*

*Dated* \_\_\_\_\_

*Proposer (print)* \_\_\_\_\_ *Signature* \_\_\_\_\_

*Secunder (print)* \_\_\_\_\_ *Signature* \_\_\_\_\_