



APPLICATION

PLEASE PRINT YOUR CHILDS DETAILS CLEARLY

Join our club for a great treat on your birthday and the opportunity to participate in fun promotions during the year.....Keep watching out for our advertising for details.



**POST TO THE IGA KIDS CLUB
P.O.BOX 153 (LPO)
NARRE WARREN VIC 3805**

First Name | | | | | | | | | | | | | | | | | | | | | |

Surname | | | | | | | | | | | | | | | | | | | | | |

Address | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | |

Town | | | | | | | | | | | | | | | | | | | | | |

State | | | | | Post Code | | | | | | Boy | | | Girl | | |

Please Tick One

Phone | | | | | | | | | | | | | | | | | | | | | |

Child's Birth Date **Day** | | | | **Month** | | | | **Year** | | | |

You must be **under 12 next** birthday Year child was born

Parent or Guardian Signature _____ Today's Date ____/____/____

~~~~Only One Entry Per child will be valid~~~~

**Please Note:** Do not enter again if you are already in the IGA Kids Club as we only accept one membership.  
Only available from your local IGA store:  
**Ryans Beaufort**

