



Tuggerah Lakes Golf Club

Member Number _____

Date _____

APPLICATION FOR MEMBERSHIP

I, Mr, Mrs, Ms, Miss _____ (Full name of Applicant)

_____ Preferred Name (Known As)

of _____ (Full address of Applicant)

Unit / Street No

Street

Suburb

_____ (Postal address)

Hereby apply to become a :

Full Playing Member (Male)

Social Golf

Social 1 Year

Associate (Female)

Tyro

Social 5 Years

Intermediate (1) 18-23 yrs

Junior

Intermediate (2) 24-29 yrs

Cadet

My details are as follows :

* Date of Birth _____

*Must be completed or N/A

* Home phone no _____

*Must be completed or N/A

* Mobile phone no _____

*Must be completed or N/A

* Email address _____

*Must be completed or N/A

* Occupation _____

*Must be completed or N/A

* Drivers License no _____

*Must be completed or N/A

* Other proof of identity _____

if no drivers licence another proof of identity must be provided

Business phone no _____

Facsimile no _____

In the event of my admission as a member, I agree to be bound by the rules of the Club for the time being in force and request you enter my name in the register of members accordingly and I agree to be bound by your constitution.

Applicants Signature _____

Date _____

Golfing Membership details must be completed on reverse of this application form

Office use only

Joining Fee \$ _____

Cash

Annual Fee \$ _____

M'Card Visa AMEX Eftpos

Cheque

Golfing Membership only

Current or previous Golf Club _____

Golf Link Number _____

Current Handicap _____

Will Tuggerah Lakes Golf Club be your Home Club **Yes / No**

If **No** Name of Home Club _____

Name of Proposer _____ Membership no _____

Signature _____

Name of Seconder _____ Membership no _____

Signature _____

Interviewer's use only

Interview date _____

Interviewed by _____

Number of Cards required for handicap _____

Comments:

