

PO Box 8246 93 Aslett Drive Hannans WA 6433 Ph: (08) 9021 1330 E: admin@goldfieldsgolfclub.com.au

MEMBERSHIP APPLICATION

SUB-JUNIOR 12-14 yrs incl.

I, the undersigned, wish to apply for membership of the Goldfields Golf Club (Inc.), in the following category: (Please select one option)

FIRST NAME

Yes

No

FULL		SUB-JUNIOR 0-11 yrs incl.		SUB-JUNIC 12-14 yrs ir
Nomination \$200		Nomination \$50		Nomination \$50
Annual Fee \$1,467.20		Annual Fee \$252.00		Annual Fee \$302.00
APPLICANT'S D	ETAI	LS	•	
SURNAME				F
POSTAL ADDRESS				
SUBURB				Р
HOME PHONE				V

Do you want Goldfields Golf Club to be your home club for handicapping purposes

JUNIOR 15-17 yrs incl.
Nomination \$50
Annual Fee \$474.50

TRANSITIONAL 18-20 yrs incl.	
Nomination \$50	
Annual Fee \$761.50	

POSTAL ADDRESS								
SUBURB				POST CODE				
HOME PHONE				WORK PHONE				
MOBILE PHONE				EMAIL ADDRESS				
DATE OF BIRTH				GENDER MALE		MALE	FEMALE	
OCCUPATION				BUSINESS NAME				
GOLFING BACKGROUND	GOLFING BACKGROUND							
How long have you been playing golf? (Please select one option)								
Just started	Less than a year	r	1 - 3 years		3 - 5 years		More than 5 years	
Have you ever been a member of a golf club before? Yes*			Yes*	No				
*If you have answered "Yes", please complete:								
Name of your last or current golf club:								
Handicap: Current Past		Not a	Not applicable		umber			

SIGNATURES

The prescribed nomination fee is attached herewith. If my application is successful, I agree to be bound by the Constitution, the Regulations and the Code of Conduct of the Goldfields Golf Club (Inc.).

Please note: Playing rights will not be granted until a Member Induction is completed. Contact the Club Administrator on 9021 1330 to arrange a mutually convenient time.

Signature of Applicant (Parent or Legal Guardian to sign for applicants <18 years of age)

Name of Proposer Signature of Proposer

I certify that I am a current financial member of the Goldfields Golf Club (Inc.) and I am over 21 years of age.

Name of Seconder Signature of Seconder

I certify that I am a current financial member of the Goldfields Golf Club (Inc.) and I am over 21 years of age.

Office Use Only								
Approved	Member #	Entered	Password	Invoiced	Paid			
Payment Meth	od	Direct debit	Cash	EFT		Credit Card		
Processed		Member Pack	Induction					