

## **MEMBERSHIP APPLICATION FORM**

Are you a previous member of Victor Hark	of doil club:	YES [ ] NO [ ]
Full Name : Mr/Mrs/Ms/Miss/Master/D <u>r</u>		
Preferred Name:	Date of Birth:	
Occupation	Employer:	
Postal Address		
Suburb/Town	_	Postcode:
Residential Address (if different to postal)	_	_
Suburb:		Postcode:
Mobile:		
Email :		
<b>Emergency Contact Details</b>		
Name:	Relationship:	
Phone:	Mobile:	
Current or former member of a golf club	Which Club:	
Golf Link No:		Handicap:
Who do you nominate as your Home Club		
Category of Membership applied for:		
[ ] 7 Day	[ ] 9 Hole	[ ] Casual
[ ] 6 Day	[ ] City	[ ] Pay As You Play
[ ] 5 Day	[ ] Country	[ ] Interstate
[ ] Young Adult 26-35yrs	[ ] Young Adult 18-25yrs	[ ] Overseas
[ ] Junior	[ ] Rookie	[ ] Social
		[ ] Sporting
Do you own a motorised golf buggy 200kg	and over: YES [ ] NO	[ ]
Website		
•	te to receive email notifications of news & event	YES [ ] NO [ ]
Signature of Applicant :  NOTE: This application is subject to approval by the Committee	of Management. All applications shall be classed as "Provisional" until such ap	Date: proval. Provisional members may compete in
every day club/pro shop competitions but are ineligible to com	ete in Club Championships.	, , ,
Proposer Name:	Seconder Name:	
Signature: The Australian Golf Union (AGU) requires the information requires.	Signature: sted above for the purposes of GOLF Link. Your personal information will only	harves d in accordance with the GOLF Link
	uested information is not provided to the AGU you may not be able to obtain G	
Office Use Only - Joining Date	nal information trirough the AGO upon reasonable notice.	REC No: