



# Kogarah Golf Club Limited

ABN 30 000 020 468

## **Membership Application**

*Please print clearly in blue or black pen.*

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_ Surname: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address if not the same as above \_\_\_\_\_

PO Box etc: \_\_\_\_\_ Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Contact Details \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_

**How were you introduced to the Club (eg friend, internet, advertising etc)** \_\_\_\_\_

### **Required Category of Membership**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Full Playing Member | <input type="checkbox"/> Associate Member    | <input type="checkbox"/> Intermediate Member |
| <input type="checkbox"/> Junior Member       | <input type="checkbox"/> Cadet Junior Member |  |
| <input type="checkbox"/> Mid Week Member     | <input type="checkbox"/> House Member        |  |

### **Nomination**

The proposer and seconder/s of this nomination must be Members of Kogarah Golf Club. It is the responsibility of proposing Members to acquaint the applicant with all the conditions of membership of Kogarah Golf Club.

The election of Members is by the Board. It sometimes happens that the Board has no information, other than the nomination form, concerning persons proposed for membership. In these cases the Board may need to request further information from the proposing Members.

Nominator: (Please print) \_\_\_\_\_ Member No. \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Period of acquaintance \_\_\_\_\_

Seconder: (Please print) \_\_\_\_\_ Member No. \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Period of acquaintance \_\_\_\_\_

Seconder: (Please print) \_\_\_\_\_ Member No. \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Period of acquaintance \_\_\_\_\_

Have you previously held membership of Kogarah Golf Club? Yes/ No  
If so, what was the last year and period of Membership?

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Are you currently a financial member of any other golf club? Yes/ No  
If so, which club/s?

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Current Handicap (please provide handicap history)

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Have you previously been a Member of any other Golf Club? Yes/No  
If so, which club/s  
Year/s membership ceased

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Have you been proposed and not accepted for Membership of another golf club? Yes/No  
If so, which club/s Year

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Have you been suspended or expelled from another golf club? Yes/No  
If so, which club/s  
Reason (briefly)

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## ***Terms and Conditions***

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1. Upon making application for membership of the Club you acknowledge and accept that you will be subject to the Australian Golf Union handicapping system and your handicap may be reviewed at the discretion of the Board on the basis of any cards returned in any competition.
2. By making application to the Club you also expressly acknowledge and agree that you will have no right to make any representations to the handicapper before any decision is made to review your handicap and that there shall be no appeal whatsoever from any decision of the Board in relation to a review of your handicap.
3. A Member may at any time, by written notice to the Secretary Manager, resign their Membership of the Club. In accordance with the Constitution they shall be liable for all or any annual subscriptions and any arrears due and unpaid at the time of resignation.
4. The Kogarah Golf Club is subject to the Privacy Act 1988. The personal information you provide when you join is used to maintain your membership at the Club. You have the right to access any of your personal information that the Club holds about you.

The Club does not usually disclose your personal information to any other organisation or person unless there is a legal requirement to do so. The Club may disclose your information to third parties that provide services under contract to the Club. These contracts require that the third party keep your personal information confidential.

**I certify that the given particulars are correct and I hereby apply to be admitted to the membership of Kogarah Golf Club Ltd and if elected I agree to be bound by its Constitution and Company Rules as may apply from time to time.**

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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## ***Office use only***

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### **Application Form**

### **Subscription Due**

Issued to: \_\_\_\_\_

Joining: \_\_\_\_\_

Inducted: \_\_\_\_\_

Date issued: \_\_\_\_\_

Subs: \_\_\_\_\_

Member No. \_\_\_\_\_

Issued by: \_\_\_\_\_

Ins: \_\_\_\_\_

Processed: \_\_\_\_\_

Date returned: \_\_\_\_\_

Affil: \_\_\_\_\_

Received by: \_\_\_\_\_

GolfLink: \_\_\_\_\_

Total: \_\_\_\_\_