

## KORUMBURRA GOLF CLUB INC. APPLICATION FOR MEMBERSHIP (Juniors)

Office Use Only
Approval Date://
Register Entry://
Golf Link ID:
Expiry Date://

Membership Type	Koriir (Juliors)	
Membership Type  ☐ Full Year (01 Apr - 31 Mar) ☐ Pro Rata ( 31 Mar)	lar)	
Membership Category  □ Male □ Female		
□ 1 <sup>st</sup> Year □ Ordinary □ Country □ Auxilliary □ Intermediate (18 - 25 Yrs) □ Junior (< 15 Yrs) □ Junior Cadet □ Non Playing □ Social		
Applicant Details		
Title: Given	Names:	
Street Address:		
Suburb: Post Code:		
Postal Address:		
Suburb: Post Code:		
Home Phone Mobile	Email	
Date of Birth: Occup	pation:	
Emergency Contact Name Eme	ergency Phone	
Questions for Applicant		
Have you ever been a member of a Golf Club?	□ Yes □ No	
If yes, what was the name of the Club?		
2. Are you still a member of this Club? ☐ Yes ☐ No Golf Link No. if Applicable:		
If yes, would you like us to administer your Golf Handicap and be your home club? ☐ Yes ☐ No		
3. Do you have or have you ever held an Australian Golf Handicap ☐ Yes ☐ No		
If yes, what is/was your handicap?	·	
I hereby apply for membership as nominated above and declare that the information I have provided is true and correct.		
Signed: (Applicant) Date:		
Membership Proposed By:	Printed Name	
Membership Seconded By: Signature	Printed Name	
Payment Details		
Membership Fee \$	Payment Method:	
Total Amount Received \$	Date Paid://	