

Cooroy Golf Club

PO Box 28 COOROY 4563

Phone: 5447 6258

Nomination for Membership

Mr Mrs Ms Miss Master (Circle preferred Salutation)

Surname: Given Names:
(Use Block Letters)

Residential Address: Postcode:

Postal Address: Postcode:

Phone (Home) (Work) (Mobile)

E-mail Occupation: Date of Birth

Previous Club (If any) GolfLink No GA Handicap

Do you want Cooroy Golf Club to be your Home Club? Yes No (Circle one)

How did you hear about Cooroy Golf Club? Friend Newspaper Ad Leaflet Other

Type of Membership Applied for:

Class of Membership	Nomination Fee	Subscription	Total	Direct Debit
Ordinary				
Cadet **				
Junior				
Temporary (3 months limit)				
9-Hole				
Social				

Life or Ordinary Members	Name (Block Letters)	Member No	Signature
Proposer			
Secunder			

** Current student pass or aged 18-22

I hereby agree to abide by the Constitution and By-Laws of Cooroy Golf Club Inc.

Signature of Nominee: Date:

Received by: Date: Receipt No:.....

Committee use: Application approved? Yes No (Circle one)

Signed Secretary: Date: