

MALE MEMBERSHIP APPLICATION

Membership category applied for **3 Month Trial FULL PLAYING MEMBERSHIP**

APPLICANTS DETAILS

Requested start date: _____

Title Surname Given Names Date of Birth

Address Postcode

Postal Address Postcode

Home Ph Mobile Ph Work Ph

E-mail Occupation

Emergency Contact – Name Ph

GOLFING DETAILS:

Current Club Current Handicap

Golf Link Number

Have you ever been suspended or expelled by or from any other club? Yes / No

Declaration to the Board of Cronulla Golf Club Limited

I (**print full name**) of (suburb)
 apply to become a member of Cronulla Golf Club Limited and request you enter my name on the Register of Members accordingly, and I agree to be bound by the Constitution and By-Laws in force from time to time. I agree to pay the prescribed entrance fee and annual subscription to the 30th June next and all future subscriptions by 1st July in each year until I shall in writing resign.

Dated this day of 20..... Signed

NOTE: BOTH THE PROPOSER AND THE SECONDER SHALL BE MEMBERS OF AT LEAST TWELVE CALENDAR MONTHS AND ATTAINED THE AGE OF 18 YEARS

Proposer (Print) Membership No.....

Signature Date

Seconder (Print) Membership No.....

Signature Date

1. Upon making application for membership of the Club you acknowledge and accept that you will be subject to Golf Australia's handicapping and course rating systems and your handicap may be reviewed at the absolute discretion of the Board of Directors on the basis of any cards returned in any competition.

By making application to the Club you also expressly acknowledge and agree that you will have no right to make any representations to the Committee or 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.

2. A Member may at any time, by written notice to the General Manager, resign their Membership from the Club, but shall continue liable for all or any Annual Subscriptions and all or any arrears due and **unpaid at the time of such resignation**.
3. Cronulla Golf Club Limited is subject to the provisions of the **Privacy Act 1988**. The personal information provided by you on this form/application and attached documents will be used to process your membership application. Failure to provide all of the requested information may result in your application being rejected. You have a right to access and correct 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 the third party to keep your personal information confidential and secure.

For which reasons will you most likely visit the club? Dining Entertainment

Sporting Events Raffles Private Function Club Priced Drinks

What activities would you like to see at Your Club?.....

How would you like to be informed about upcoming promotion and events at Your Club?

SMS Email Website Newsletter Internal Signage

Election for the receipt of annual reports: Post Email Not required

OFFICE USE ONLY

Membership Number Allocated:

Membership Fee \$.....Receipt Number.....Date

Photo ID TypeNumber.....Sighted By.....

Approved by Board.....Date