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| PITTWATER GOLF CLUB INC.ALL COMMUNICATIONS TO HON. SECRETARY:P.O. Box 330, Rosny Park TAS 7018Email: pittgolf @bigpond.net.auInternet: pittwatergolfclub.comPh: (03) 62652069 ABN 76 022 314 203 – Registered for GST | Pelican |

**APPLICATION FOR FULL MEMBERSHIP**

I, Mr/Mrs/Ms/Miss

First Name Middle Initial Surname (Please Print)

of

 Full Postal Address Post Code

apply for membership of the Pittwater Golf Club Inc. and if my application is approved I agree to be bound by the Constitution and Rules of the said Club.

Signed: Date:

**DETAILS REQUIRED**

Occupation: Employer:

Telephone: (Home) (Work) (Mobile)

Email Address:

Current / Previous Club (if any): Year:

GolfLink No. Handicap:

Do you wish Pittwater to maintain your handicap records in future? YES or NO

Proposer: Seconder:

 Print Name Print Name

Signature: Signature:

Application Approved: Date:

MEMBERS: Nomination Fee……...$100.00 **(Nomination fee must be enclosed with this application)**

 Annual Subscription…$525.00

 Hon. Secretary (01.01.2022)

PITTWATER GOLF CLUB INCORPORATED

pittgolf@bigpond.net.au

PO BOX 330, ROSNY PARK, TAS, 7018

**NOTICE TO ALL MEMBERS**

To update and ensure the accuracy of Club records

 can you please complete the details below and

 return it to the Club as soon as possible.

Please note all fields are important and will ensure we are able to better

assess the make-up of our Membership and effectively target your needs

and future Members. The ‘date of birth’ is required for all Members

 (Mr / Mrs / Ms / Miss) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial \_\_\_\_\_\_\_\_

Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Suburb\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Suburb\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if different from above)

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

 Fax\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Left/Right Handed \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Information:

Name (First and Surname)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship (i.e. Wife) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (for emergency contact) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_