

Wyangala Country Club Ltd

Application for Membership

TO: The Board of Directors, Wyangala Country Club Limited.

Email this form to info@wyangalacountryclub.com.au

Membership duration:	<input type="checkbox"/> 1 year
(please tick one box)	<input type="checkbox"/> 3 years
Claim concession	<input type="checkbox"/>
(government pension, Centrelink etc)	

I, Mr/Mrs/Miss/Ms _____ / _____
FULL NAME PREFERRED FIRST NAME

of _____
ADDRESS

Date of Birth _____ / _____ / _____
(Members must be over the age of 18 years) EMAIL ADDRESS PHONE NUMBER

apply to become a member of Wyangala Country Club Limited and have my name entered on the register of members. I agree to be bound by the Club Constitution, Memorandum and Articles of Association, Rules or By-Laws and Policies.

CORRESPONDENCE

Members have the option to elect how they receive Club correspondence and are encouraged to receive correspondence by email as it is faster, cost effective and sustainable.

Email Posted No correspondence

SUB CLUB MEMBERSHIP

Members are invited to join a sub club at \$5/year or \$2/year for Juniors:

Golf Club Fishing Club Bowls Club

DATED this day of 20.....
Applicant signature

Nomination and Membership Fees must be lodged with this Application

I,, being an ordinary member of Wyangala Country Club Limited, nominate the above-named Applicant for membership of the Club. The applicant is known to me and I consider him/her to be a person worthy of admission to the Club.

.....
Nominator signature

I,, being an ordinary member of Wyangala Country Club Limited, nominate the above-named Applicant for membership of the Club. The applicant is known to me and I consider him/her to be a person worthy of admission to the Club.

.....
Seconder signature

RECEIVED this day of 20.....
Secretary signature

Receipt Number: _____ Membership Number: _____ Details entered: _____