



GLEN WAVERLEY GOLF CLUB INC.

PO Box 67, Glen Waverley, VIC 3150

APPLICATION FOR MEMBERSHIP

Membership category required: Ordinary: <input type="radio"/> Junior: <input type="radio"/> Country: <input type="radio"/>		
SURNAME:		GIVEN NAMES:
ADDRESS:	SUBURB:	POST CODE:
TELEPHONE:		EMAIL:
Male: <input type="radio"/> Female: <input type="radio"/>	DATE OF BIRTH:	
I am currently, or have been, a member of a golf club: Yes: <input type="radio"/> No: <input type="radio"/>		
If Yes, please complete the following information and provide evidence of current handicap, If applicable.		
Name of club: _____ Year: _____ Handicap: _____		
GolfLink Number: _____		
I hereby certify that the above information is true and correct in every particular, that I am an amateur as defined by the Royal and Ancient Golf Club of St.Andrews, and I undertake, if accepted, to be bound by the Rules of Incorporation and By-Laws of the Club and the Articles of Association and By-Laws of the Victorian Golf League or Victorian Womens Golf League.		
DATE:	SIGNATURE:	
PROPOSED BY:	SIGNATURE:	
SECONDED BY:	SIGNATURE:	

FEES:

Joining Fee (except Juniors): \$100

Annual Subscription: Male: \$155 Female: \$145 Junior: \$100

Bank Details: BSB 013 006 Acc No. 003865528

OFFICE USE ONLY	Joining Fee		
	Annual Fee		
	Entered in Register		
	Entered in GolfLink		