

NOMINATION FOR MEMBERSHIP

Surname

(Mr. Mrs. Ms)

First Name

Address.....

.....

.....(Post Code).....

Email:

.....

Telephone:.....Mobile:.....

Occupation

Date of Birth:.....

Previous Club:.....

Membership: (circle one)

Full Playing Nine Hole Summer

Country Associate Junior (10-17) Intermediate (18-19)

I agree to abide by the rules of the Waihi Golf Club:

*My contact number will **not** be published in Waihi Golf Club membership booklet*

Sign.....Date:.....

Proposer:.....Seconder.....

Bank A/c Details: Waihi Golf Club 03 1575 0042820 00

SUBSCRIPTIONS

2020 YEAR

1st January to 31st December 2020

Full Playing \$740.00

Nine Hole \$490.00

Country \$420.00

Summer \$435.00

Junior (under 18) \$115.00

Junior/Student \$135.00

Intermediate \$245.00