

# MEMBERSHIP APPLICATION



- |                                  |  |  |
|----------------------------------|--|--|
| <input type="checkbox"/> FULL    | <input type="checkbox"/> 23-26 YEAR OLD    | <input type="checkbox"/> FLEXI A - 40 GAME |
| <input type="checkbox"/> FAMILY  | <input type="checkbox"/> 18-22 YEAR OLD    | <input type="checkbox"/> FLEXI B - 30 GAME |
| <input type="checkbox"/> LOYALTY | <input type="checkbox"/> 14-17 YEAR OLD    | <input type="checkbox"/> FLEXI C - 20 GAME |
| <input type="checkbox"/> COUNTRY | <input type="checkbox"/> UNDER 14 YEAR OLD | <input type="checkbox"/> COMMUNITY/SOCIAL  |

## PERSONAL INFORMATION

NAME

DATE OF BIRTH

ADDRESS

PHONE

EMAIL

OCCUPATION

SIGNATURE

## GOLFLINK HISTORY

ARE YOU A CURRENT OR RESIGNED MEMBER OF ANOTHER CLUB OR BUNINYONG GOLF CLUB?

Y/N

IF YES - DETAILS OF MOST CURRENT GOLFLINK NUMBER

WOULD YOU LIKE BUNINYONG GOLF CLUB TO BE YOUR HOME CLUB?

Y/N

IF NO - I HAVE NEVER HELD AN OFFICIAL AUSTRALIAN HANDICAP OR RECOGNIZED OVERSEAS EQUIVALENT - TICK

<b>Office Use Only</b>	
<b>Payment Amount</b>	<b>Receipt No/Date</b>
<b>Direct Debit Y/N</b>	<b>Email Input</b>
<b>Members Details Input</b>	<b>Board Approval Date</b>
<b>Card Given/Sent</b>	<b>Letter Sent</b>
<b>Golflink/Member No.</b>	



**03 4311 3805**  
**0493 232 817**



**www.buninyong.golf**

**613 Learmonth St, Buninyong**



**admin@buninyong.golf**

