



# APPLICATION FOR MEMBERSHIP

Junior Golf Member

MASTER  MISS  SURNAME: \_\_\_\_\_

GIVEN NAME(S): \_\_\_\_\_

FEMALE  MALE  DATE OF BIRTH: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

SUBURB: \_\_\_\_\_ STATE: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

POSTAL ADDRESS (if different): \_\_\_\_\_

SUBURB: \_\_\_\_\_ STATE: \_\_\_\_\_ POSTCODE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

LEFT OR RIGHT HANDED GOLFER: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

**MEMBERSHIP STATUS** (Membership from 1st July to expire 30th June)

Junior (17 and under) \$60

SCHOOL SPORT: Y  N  SCHOOL: \_\_\_\_\_

**IMPORTANT NOTICE - CIVIL LIABILITY ACT 2002 (NSW) - RISK WARNING AND WAIVER**

All persons are warned that participation in golf and other recreational activities may involve the risk of personal injury caused by, for example, falls or physical exertion. It is a condition of entry to these premises and course that any person who engages in golf and other recreational activities agrees to do so entirely at his or her own risk.

By Order of the Board of Directors

*"I desire to become a member of East's Leisure & East Maitland Bowling Club and hereby agree to be bound by your Articles of Association and Rules or Laws made hereunder."*

PARENTAL AUTHORISATION - NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

|           |              |             |            |
|-----------|--------------|-------------|------------|
| PROPOSER: | (Print name) | (Signature) | (Badge No) |
|-----------|--------------|-------------|------------|

|           |              |             |            |
|-----------|--------------|-------------|------------|
| SECONDER: | (Print name) | (Signature) | (Badge No) |
|-----------|--------------|-------------|------------|

**\*\* PLEASE ALSO COMPLETE AND SIGN BACK OF THIS FORM \*\***

**OFFICE USE ONLY**

|                                       |   |
|---------------------------------------|---|
| Golf No .....                         | Entered in computer by .....                  |
| Social No .....                       | Receipt No and Date .....                     |
| Date of Board Meeting (joining) ..... | Amount Paid ..... EFTPOS / CASH / CHEQUE / DD |
| Date of Committee Meeting .....       | ID Type .....                                 |
| Checked by .....                      | ID number .....                               |

Are you a Golfing Member of another Club? YES  NO

If yes, which Club(s)?

Golf Link number for this Club

Do you wish for Easts Leisure & golf to be your home Club for handicapping? YES  NO

IF NO, Please state your Golf Link number for the Club you wish to be your home Club

Do you have a current AGU handicap? YES  NO

Current handicap

Would you like a concise Financial Report posted to you? YES  NO

Do you wish to receive general promotional material from the Club via post from time to time? YES  NO

Do you wish to receive general promotional material from the Club via email from time to time? YES  NO

SIGNATURE:  DATE:

### PRIVACY STATEMENT

East Maitland Bowling Club and Easts Leisure & Golf is subject to the provisions of the Privacy Act 1988. The personal information provided by you on this form/application will be used to process your membership application. Failure to provide all of the requested information may result in your application being rejected. You have a right to access and correct any of your personal information that the Club holds about you.

The Club does not usually disclose your personal information to any other organisation or person unless there is a legal requirement to do so. The Club may disclose your information to third parties that provide services under contract to the Club. These contracts require the third party to keep your personal information confidential and secure.