



NON GOLFING MEMBERSHIP APPLICATION

Nelson Bay Golf Club Ltd ABN 66001023 847
Phone (02) 49811132



Mr / Mrs / Miss Surname _____

PHOTO IDENTIFICATION MUST BE SIGHTED BY STAFF FOR ALL APPLICATIONS

Given Names _____

Date of Birth _____ Occupation: _____

Residential & Postal Address: _____

Phone No: _____ Email: _____

I hereby apply for Non Golfing Membership of the Nelson Bay Golf Club Ltd, and, if accepted, agree to be bound by the Memorandum and Article of Association, of the said Club, and to all amendments there to.

Applicants Signature _____ **Date** _____

Proposer and Seconder must have been a member for a minimum of at least one (1) year standing.

We the undersigned, nominate the candidate named above:

Proposed by:

Seconded by:

<p>..... (Full Name Please Print)</p> <p>Signature:.....</p> <p>Membership Number.....</p>	<p>..... (Full Name Please Print)</p> <p>Signature:</p> <p>Membership Number.....</p>
--	---

Office Use Only

Membership No: _____ **Subs** _____ ID Sighted by: _____ Date: _____

Approved at BOARD MEETING ON: _____

M **A** **F**

The Privacy Act

Your privacy has and always will be important to us. The Nelson Bay Golf Club confirms its commitment to the privacy of its members and that it is complying with the requirements of the legislation.