## **Membership Application Form**

I desire to become a member of HILL TOP GOLF and COUNTRY CLUB Limited (the Club) and hereby agree, if elected, to be bound by the Memorandum, Articles of the Association and the By-Laws of the Club, as amended or altered from time to time and with the present form, of which I am familiar.



PERSONAL DETAILS								
I, Mr /Mrs /Miss /Ms Surname:	Given Name:		Preferred Name:					
Postal Address:								
Suburb:	State:		Post Code:					
Mobile:		رچ Home Phone:						
Email:		A Occupation:						
Date of Birth:		Bus Tel No:						
Emergency Contact:		Emergency Relationship:	Emergency Phone:					

### NOMINATION

The above-named candidate is personally known to us and we believe him/her to be a person suitable to be elected as a member of <b>HILL TOP GOLF and COUNTRY CLUB Limited:</b>					
Proposed by(Print name & Membership no.)	Sign				
Seconded by(Print name & Membership no.)	Sign				

MEMBERSHIP TYPE					
<ol> <li>Have you ever been a mer Hill Top Golf and Country Clu</li> <li>Do you permanently reside 30km and 70km radius from</li> </ol>	ub before? e within a	Yes 🗌 No 🗌 Yes 🗌 No 🗍	<ul> <li>2. If yes, what was the d you last Joined Hill T</li> <li>4. Do you permanently a 70km radius from H</li> </ul>	op? reside outside Yes 🗌 No 🗌	
Refer to MEMBERSHIP CATEGORIES & DEFINITIONS for clarification					
GOLF & BOWLS Golf & Golf/Bowl \$774	Remote \$380	Golf Senior (ov \$610	er 70) Golf Intermediate \$325	(1) Golf Intermediate (2) \$610	
GOLF ONLY Country \$610	3 Day \$325	Summer \$506	Winter \$432		
BOWLS ONLY Bowls Full \$193	JUNIOR Junior (wi \$80	ith Handicap)	NON-PLAYING 5-year Social Membership \$20	☐ 1-year Social Membership \$5	

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### GOLF MEMBERSHIP

Please note, original cards which have been verified by a current hol a new handicap.	der of an AGU handicap are require	d when allocating	
<b>1.</b> Do you have a current AGU/Golf link number or have had one in the past?YesNo	6. What Club would you like to use as your Home Club for handicapping? (Please note, you must be a current member of the Club that you are requesting as your Home Club.)		
2. Yes, what is it?	of the Club that you are reques	ling as your home club.)	
3. Where is it held?	Hill Top Or Curr	ent Club	
4. What is the Exact	7. Do You Own a Golf Cart?	Yes 🗌 No 🗌	
5. Handicap, if known.	8. If yes, is it registered with Club	? Yes 🗌 No 🛄	
PAYMENT METHODS	PRIVACY STATEMENT		
1. Payment in full:	From time to time, Hill Top Gol		
EFT EFTPOS CHEQUE CASH	send you information about our Club services and/or promotions. We respect your privacy, so please let us know if you do not wish to receive information from us.		
* Direct Debit payments will be taken on the 15th of each month and include a \$3.50 per month administration fee. Please obtain a direct debit authority form from either the office or download from our website.	Please keep me up to date with what's happening around the club.		
<b>2.</b> Payment by monthly direct debit:			
DECLARATION	FOR OFFICE USE ONLY		
I declare that the information provided by me is true and correct.	Date received:	Amount paid:	
	Receipt number:	Category:	
CANDIDATE'S SIGNATURE	Balance:	Letter sent:	
DATE	Membership card:	Bag tag:	

