

## **MOUNT BEAUTY GOLF CLUB**

PO Box 23, Mount Beauty, Vic. 3699 W: http://www.mtbeautygolfclub.org.au E: membership@mtbeautygolfclub.org.au

## **Application for Membership**

Full Name:(Mr/Mrs/Ms/Miss/Dr):
Residential Address:
Postal Address:
Telephone: (Home) (Work) (Mobile)
Email:
Do you wish to receive email notification & newsletters; YES/NO (Email is our preferred method of communication)
Date of Birth:
Membership Category: Full Member: Country Member: Junior Member:
Golf Link Number if applicable: Handicap: Handicap:
Member of any other Golf Clubs (please list):
Do you wish Mount Beauty Golf Club Inc. to be your home club: YES/NO
NOMINATION DETAILS:
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I being a current Member of the Club believe the candidate to be a suitable person to be accepted as a member of the Club:
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I being a current Member of the Club believe the candidate to be a suitable person to be accepted as a member of the Club:  Nominee:
I being a current Member of the Club believe the candidate to be a suitable person to be accepted as a member of the Club:  Nominee:

Please deposit appropriate Fees into our Bank using your SURNAME as a reference

Bank Details: BSB 633 000 A/c # 151028909 Mount Beauty Golf Club Inc