



# BANNOCKBURN GOLF CLUB

## Application for Membership 2023

|  |          |                              |                             |
|--|----------|------------------------------|-----------------------------|
| Name   |          | Date \ \                     |                             |
| Address  |          |                              |                             |
| Phone  |          | Mobile                       |                             |
| Email  |          |                              |                             |
| Occupation   |          |                              |                             |
| Are you a member of another club   |          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Club   | Handicap | Golf Link No.                |                             |
| Will Bannockburn Golf Club be your home club   |          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If under 21, please state  | Age:     | Date of birth:               |                             |
| <ul style="list-style-type: none"> <li>I am aware of the fact that this club's low fee structure is because of our reliance on volunteers to do most of the maintenance and upkeep works on this course</li> </ul> |          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <ul style="list-style-type: none"> <li>I am willing to assist from time to time when a working-bee is called</li> </ul>  |          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <ul style="list-style-type: none"> <li>Medical information: I have a medical condition that the Medical Officer needs to be informed of</li> </ul>   |          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <ul style="list-style-type: none"> <li>Despite my medical condition there is no reason why I am not able to safely play the course and/or participate in club events</li> </ul>                                    |          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <ul style="list-style-type: none"> <li>Are you or have you ever been on golflink for this Golf Club or another Club</li> </ul>   |          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

### I hereby make application for membership of the Bannockburn Golf Club

|                  |           |
|------------------|-----------|
| Name             | Signature |
| <b>NOMINATOR</b> |           |
| Name             | Signature |

### FEE STRUCTURE (Note: No nomination fees are required. Total includes all affiliation fees)

|   |       |                          |
|---|-------|--------------------------|
| FIRST YEAR FAMILY MEMBERSHIP                              | \$750 | <input type="checkbox"/> |
| ONGOING FAMILY MEMBERSHIP                                 | \$800 | <input type="checkbox"/> |
| ADULT: 7 day membership                                   | \$400 | <input type="checkbox"/> |
| INTERMEDIATE (18 to 21/23 student)                        | \$175 | <input type="checkbox"/> |
| JUNIOR (17 and under)                                     | \$ 70 | <input type="checkbox"/> |
| JUNIOR/JUNIOR   | \$ 35 | <input type="checkbox"/> |
| SOCIAL MEMBER Non golfing (Full fee, no nomination)       | \$ 30 | <input type="checkbox"/> |
| 6 MONTH MEMBERSHIP October to March or April to September | \$220 | <input type="checkbox"/> |
| COUNTRY MEMBERSHIP (Residing 100 km from our club)        | \$200 | <input type="checkbox"/> |

### RECEIPT OF NOMINATION

|                                 |           |      |
|---------------------------------|-----------|------|
| Bannockburn Golf Club Secretary | Signature | Date |
|---------------------------------|-----------|------|

*This club is a member of the Good Sports Clubs' program with Non-Smoking, Responsible Serving of Alcohol and Sun Smart and Hot Weather policies are in place. We are a welcoming and inclusive club and ensure that every effort is made to provide a safe playing environment.*