

# BEENLEIGH RSL & GOLF CLUB

## MEMBERSHIP APPLICATION - GOLF

### PERSONAL DETAILS

Title \_\_\_\_\_  
First Name \_\_\_\_\_ Surname \_\_\_\_\_  
Preferred Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Residential Address \_\_\_\_\_  
Postal Address \_\_\_\_\_  
Mobile \_\_\_\_\_ Home Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Occupation \_\_\_\_\_  
Emergency Contact & Relationship \_\_\_\_\_ Phone \_\_\_\_\_

### FAMILY MEMBERS

If you are related to any current members of the Club, please provide details

Full Name \_\_\_\_\_  
Relationship \_\_\_\_\_

### MEMBERSHIP CATEGORY

*Membership through until 30th June 2019*

- |                                       |   |   |
|---------------------------------------|---|---|
| <input type="checkbox"/> Full Member  | <input type="checkbox"/> Partner Member | <input type="checkbox"/> Junior Member  |
| <input type="checkbox"/> Midweek      | <input type="checkbox"/> Colt Member    | <input type="checkbox"/> My Golf Junior |
| <input type="checkbox"/> Flexi Member | <input type="checkbox"/> Service Member | <input type="checkbox"/> Social Member  |

Joining as a Senior? Please provide your Senior/Pension Card #: \_\_\_\_\_

Current Service (Personnel Number) or Ex Service Personnel (RSL State Member #): \_\_\_\_\_

### GOLF DETAILS

If you are currently or have previously been a member of another Golf Club, please advise:

Club Name \_\_\_\_\_

Golf Link Number \_\_\_\_\_ Golf Handicap \_\_\_\_\_

Make Mt Warren Park my Home Club?  YES  NO

# BEENLEIGH RSL & GOLF CLUB

## JOINING DETAILS

Have you been referred to Mt Warren Park Golf Course by an existing member?  Yes  No

If yes, name of referring member: \_\_\_\_\_

What prompted your application:

Referral (Family/Friend)       Website       Visit to the Club  
 Flyer       Social Media (Facebook)       Other: \_\_\_\_\_

Do you smoke? (for development purposes)       Yes       No

## MEMBERSHIP DECLARATION

Have you ever been refused membership or had your membership withdrawn from a Club?

Yes       No

I certify that the particulars set out in my application are true and correct.

I, hereby, agree to abide by the Constitution of the Mt Warren Park Golf Club Inc.

Whilst on the premises (Golf Course, Clubhouse, Pro-Shop, Carpark) of the Beenleigh RSL & Golf Club, I will abide by the rules and the by-laws of the Returned and Services League of Australia (Qld Branch) Beenleigh and District Sub Branch.

I agree to be bound by any rules made by the RSL Board or Management, or the elected Golf Committee from time to time.

If you have provided an email address, the Club may send you newsletters, invitations, advertising or other promotional communications. By signing this application you consent to those communications for the purposes of the Spam Act 2003. If you wish to "opt out" of the specified communications please tick

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## OFFICE USE ONLY

Golf Membership #: \_\_\_\_\_ RSL Membership #: \_\_\_\_\_

MiClub Information Issued by: \_\_\_\_\_ Welcome Pack Issued by: \_\_\_\_\_

Subscription Paid: \$ \_\_\_\_\_ Golf Membership Receipt #: \_\_\_\_\_

Payment Method:  Cash  Eftpos  Cheque  Bank Deposit  Payment Plan (*installments*)

Direct Debit - Completed:  Monthly Payment Agreement  Direct Debit Authority Form

Application Processed by: \_\_\_\_\_ Processed on: \_\_\_\_\_