



Fee Paid: \$		<b>Initial</b>
Licence Verified: Y	<input type="checkbox"/>	
(tick) N	<input type="checkbox"/>	
Date:	/	/
Ent. In MYOB	/	/
To Committee	/	/
Ent. In MiClub	/	/
For Filing	/	/

3 Square Mile Rd Clare SA 5453  
 Phone: 0417 889 597  
 Email: secretary@claregolfclub.com.au  
 www.claregolfclub.com

**APPLICATION FOR MEMBERSHIP**

Title.....Given Names.....Surname.....

Residential Address .....Town.....Postcode.....

Phone \_ \_ \_ \_ \_ (email).....

Occupation ..... Date of Birth...../...../.....

Emergency Contact Name..... Phone \_ \_ \_ \_ \_

*I hereby apply to become a member of the Clare Golf Club Inc. for the period 1/4/20– 30/3/21 in the following category (Please tick box):*

- |                   |                          |       |   |                  |
|-------------------|--------------------------|-------|---|------------------|
| Full Member       | <input type="checkbox"/> | \$690 |   |                  |
| Senior Member     | <input type="checkbox"/> | \$610 | (65yrs and over)  |                  |
| Restricted Member | <input type="checkbox"/> | \$390 | generally new to golf but at Committee’s discretion                               | No voting rights |
| Country Member    | <input type="checkbox"/> | \$390 | must reside outside 50 km radius of the Clare Golf Club                           | No voting rights |
| Summer member     | <input type="checkbox"/> | \$390 | from 1 <sup>st</sup> October (current year) to 31 <sup>st</sup> March (next year) | No voting rights |
| Winter Member     | <input type="checkbox"/> | \$370 | from 1 <sup>st</sup> April to 30 <sup>th</sup> September of each year.            | No voting rights |
| Junior Member     | <input type="checkbox"/> | \$70  | applies to any person under 21 years of age.                                      | No voting rights |
| Social Member     | <input type="checkbox"/> | \$390 | no competition playing rights (except twilight)                                   | No voting rights |

**Subscriptions are payable upon application.**

Monthly direct debit is available for a fee (\$2 per month) please contact the club at [secretary@claregolfclub.com.au](mailto:secretary@claregolfclub.com.au)

• Have you a current or previous Golf link Number? No / Yes \_ \_ \_ \_ \_ Club: \_\_\_\_\_

• Do you wish Clare Golf Club to be your Home Club? (tick) Yes  No  **N.B you may only have 1 number**

**\*\*By signing this application form you are agreeing to the following:**

- Annual Subscriptions are due on the **1<sup>st</sup> April of each year** with pro-rata rates applying after the 1<sup>st</sup> July in each year
- A member may resign from membership of the Club on one month’s notice in writing to the Club. A resigning Member is liable for any outstanding fees or subscriptions which **may or will** be recovered as a debt due to the Club. **Fees Policy?**
- Adherence to the Constitution of the Clare Golf Club Inc.
- Adherence to the Regulations set by the Management Committee
- Adherence to the Clare Golf Club Code of Conduct & Discipline Policy
- Adherence to the Golf Australia Member Protection Policy
- Adherence to all Policies and Procedures for the Clare Golf Club

**\*\*All Policies and Procedures for the Clare Golf Club can be found on the Members Notice Board in the downstairs bar or in email from the Secretary.**

Applicants Signature ..... Date ..... /..... /.....

\*Proposed By (Sig).....

Print Name .....

**\*The proposer must be a financial member of the Clare Golf Club Inc**

Approved by Committee .....
Name .....
Date ..... /..... /.....