**Nomination for Membership**

**Personal Details**

Title: Mr / Mrs / Ms / Miss

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Work\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mobile\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please give details of the last club at which you were a member

Name of Club \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Which years \_\_\_\_\_\_\_\_\_\_\_\_ Handicap \_\_\_\_\_\_

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

**Proposal**

Membership Type: Full \_\_\_\_ Associate \_\_\_\_\_ Junior \_\_\_\_\_

 Under 18 years as at January 1 each year

 Fee Applicable $ \_\_\_\_\_\_\_\_\_\_\_\_

#### **Proposed Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Seconder Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Both the Proposer and Seconder must have been members for at least two years and must be over the age of 18 years.

**Declaration**

I declare that the details provided are true in all respects. I agree to abide by the rules of the Elderslie Golf Club and the rules of golf.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The Elderslie Golf Club respects your privacy. Your personal details will remain confidential, will only be used to conduct official club business and will not be disclosed to any other parties except to the applicable affiliation organisations.

Send the completed form to the Club at PO Box 311, Brighton TAS 7030, drop off at the Club or pass to a Committee Member.

**Office use only**

**Date Processed:\_\_\_\_\_\_\_\_\_\_ Receipt Number: \_\_\_\_\_\_\_\_\_\_ Amount receipted:\_\_\_\_\_\_\_\_\_**

**Roster/Letter sent Y / N Database updated Y / N Handicapper notified Y / N**