

BEENLEIGH RSL & GOLF CLUB

MEMBERSHIP APPLICATION - GOLF

PERSONAL DETAILS

Title: (circle) Mr / Mrs / Ms / Miss / Other	First Name:
Preferred Name:	Surname:
Date of Birth: / /	Gender:
Residential Address:	
Suburb	Postcode:
Phone:	Mobile:
Email Address:	
Occupation:	Do You Smoke: Y / N <i>for development purposes</i>
Emergency Contact (EC) Name:	EC Relationship:
	EC Phone:

MEMBERSHIP CATEGORY

Membership through until 30th June

- 7 Day Member U 18 6 Day Member - Flex# Junior Member - no comps
 6 Day Member^ 5 Day Member * Corporate

^ Sunday - Friday | * Monday - Friday (Public Holidays not included) | #Sunday - Friday (Public Holidays not included)

Seniors Card Number:
Armed Forces - Current or Ex Army / Navy / Air Force Number:
Other (Admin Only):

OTHER

- Cart Registration *(private)* Locker Hire *(if available or join the wait list)* Buggy Storage *(if available or join the wait list)*

Private Golf Cart Description:
Hire / Storage Number (Admin Only):

GOLF DETAILS

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

Club Name:	
Golf Link Number:	Handicap:

Would you like to make Mt Warren Park your Home Club? YES NO

BEENLEIGH RSL & GOLF CLUB

JOINING DETAILS

What prompted your application:

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

Have you been referred to Mt Warren Park Golf Course by an existing member: Y / N

If yes, name of referring member: _____

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Have you ever been refused membership or had your membership withdrawn from a Club?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 terms of the Mt Warren Park Golf Membership Policy.

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 & Services League of Australia (Qld Branch) Beenleigh & 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

I understand I am signing up for a 12-month golf membership or a pro rata golf membership to 30th June regardless of payment method selected

Signed: _____ Date: _____

OFFICE USE ONLY

Club Membership #:	Photo ID #:
MiClub Info Issued by:	Photo ID Type:
RSL Proposed by:	Date:
RSL Secoded by:	Date:
App Processed by:	on:

Payment Method:	Amount Paid:
Payment Plan: Y PP Fee: \$	Initial Payment: Instalments:
Forms Completed & Returned:	Payment Plan T&Cs Agreement Y / N DD Authority Form Y / N
PP Preferred Processing: DAY:	DATE: