



WATERKLOOF GOLF CLUB
 P O BOX 25098
 MONUMENT PARK, 0105
 MONUMENT PARK, 0105
 TEL (012) 460-2542, FAX (012)460-9338
waterkloofgolfclub@mweb.co.za

MEMBERSHIP NUMBER:

APPLICATION FOR MEMBERSHIP OF WATERKLOOF GOLF CLUB

*I hereby apply to WATERKLOOF COUNTRY CLUB for membership of the club.
 The type of Membership applied for is stipulated below.*

The following particulars relate to me:

Title: _____

Full Name: _____

Surname: _____

Nick Name: _____

Initials: _____

ID Number: _____

Birth date: _____

Email: _____

Postal Address: _____ **Code:** _____

Residential Address: _____ **Code:** _____

Telephone (Home): _____

Cellphone number: _____

Gender: Male Female Language: Afrikaans English Notification Method: cell Email Both

Employer details

Company Name: _____

Postal Address: _____ **Code:** _____

Telephone (Office): _____

Fax number: _____

Next of Kin details:

Name and Surname: _____

Relationship: _____

Residential Address: _____

Cellphone number: _____

MEMBERSHIP CATEGORY - PLEASE TICK

<input type="checkbox"/> Full Male Member	<input type="checkbox"/> Full Ladies Member	<input type="checkbox"/> Week day 60+	<input type="checkbox"/> Full Student Member	<input type="checkbox"/> Other
<input type="checkbox"/> Full Male Pensioner	<input type="checkbox"/> Full Ladies Pensioner	<input type="checkbox"/> Country Member	<input type="checkbox"/> Scholar Membership	

Name of Previous Club: _____

Letter Of Previous Club: _____

Official Handicap: _____

Printout of Scores: _____

PROPOSED BY: _____ **MEMBER NUMBER:** _____

If elected to Membership, I hereby agree to fully abide by the constitution of Waterkloof Golf Club.
 I agree to pay the undermentioned fee upon submitting this application and accept that this is not refundable if this application is accepted.
 In addition I accept that the annual subscription fee is due and payable by 31 December of every year.
Resignations must be submit in writing, prior to that date failing which I will be liable for the following years subscription.

DATE: _____ **APPLICANT SIGNATURE** _____

FEE STRUCTURE	BANKING DETAILS
PLEASE ENQUIRY TO ADMIN OFFICE FOR UPDATED FEES	NEDBANK PRETORIA
012 460 2542 x 2	ACCOUNT NUMBER: 149 719 2412
	BRANCH CODE: 149 745
	REFERENCE: NAME & SURNAME