



# Trafalgar Golf Club Inc.

Gibsons Road,  
P.O. Box 123,  
Trafalgar, Vic. 3824  
Tel: (03) 5633 1110

Community Bank  
Trafalgar & District



## ON BEHALF OF TRAFALGAR GOLF CLUB and CLUB MEMBER

..... Date: .....  
(insert club member's full name)

### I wish to introduce the following person:

..... Date: .....  
(insert applicant's full name)

to: **Community Bank Trafalgar & District (Bendigo Bank)**  
**103A Princes Highway, Trafalgar 3824.**

### As part of Trafalgar Golf Club's member referral promotion.

I, ..... consent to the Community Bank  
(insert applicant's full name)

*advising that I have agreed to commence a banking relationship with Bendigo Bank through the Community Bank Trafalgar & District. In agreeing to have this personal information shared with the Trafalgar Golf Club, I understand that none of my personal details or any details of my banking relationship will be shared with anyone from the Golf Club.*

Signature: ..... Date: .....

Please present this form to the cashier or branch manager as part of the establishment of your banking relationship to be entered into the annual draw in June for a year's club members for both the applicant and the referring club member named above.