

TRAFALGAR GOLF CLUB Inc.
PO Box 123 TRAFALGAR
Ph. (03) 5633 1110 Fax (03) 5633 243
Email: golf@trafalgargolf.com.au
ABN: 36 331 637 449



MEMBERSHIP APPLICATION

I desire to become a(member)* of the Trafalgar Golf Club and I hereby agree if elected to be bound by the constitution and by-laws of the Club.

(Mr / Mrs / Ms / Miss / Mast / Dr / Other).....

First Name.....Surname.....

Middle Initials..... Occupation.....

Home Address

Town / Locality Postcode

Postal Address (if different to above).....

Phone: Home Business Mobile

E-Mail Date of Birth / /

Home Club for Handicapping if not Trafalgar

Golflink Number for Handicapping if not Trafalgar

Exact name on Golflink card if not Trafalgar

Signed Date Signed

Proposer /please print name.....

Seconder / please print name

A Nomination Fee of \$200 for new members other than Juniors and non-playing members must accompany this form. The Nomination Fee is Non-Refundable. The Nomination Fee will be deducted from the current year's Membership Fees when Invoiced.

Resignation from the Trafalgar Golf Club MUST be in writing addressed to The Secretary.

* Full Member, Country Member, Pensioner Member, Junior Member, Student Junior Member Working Junior Member, Seniors 9 hole Member, 6 month Member, Beginner, Non-Playing/Social Member.