

NOWRA GOLF CLUB NOMINATION FOR MEMBERSHIP



To the Board of Directors

I hereby apply to be elected a Member of the Nowra Golf Club, subject to the rules and by-laws of the Club. I consent to accept (and at all times abide by) those rules without any reservation.

TYPE OF MEMBERSHIP (tick one):			GOLD - \$599	BRONZE - \$195		
JUNIOR - \$50 SOCIAL GOL		F - \$320	REMOTE - \$195	SOCIAL NO	GOLF - \$10	
ADDITIONAL F	PAYMENT TO	ELIMINATE SOC	IAL GREEN F	EE (NOT available to Bronz	e Members (tick	if applicable):
\$175						
Name: (Mr/Mrs.	/Ms/Miss)					
Address:	Street:	(Last Name) (First and Middle Names)				
Addiess.	Town:					
Tolonhono					ue	
Telephone:	Home:					
Email Address:						
Current Home Club: Change Home Club to NGC? Yes / No Handicap:						
		ap held over the pasight to alter handica		y see fit.		
Date of Birth:	/	/				
License No.:			Sight	ed by Staff:	(Staff Initi	als)
Signature of Ap	plicant:			Date:		
information will b information is not	e used in accort t provided to the	rdance with the Golf e AGU, you may not	Link "Activity" ar	formation above for the purp d to provide you with Golf L n Golf Link service including n through the AGU upon rea	ink services. if th an Official Austr	ie requested alian Handicap
Nominator:		ase Print)	Membershi	p No	(Signature)	
Nominator:(Please Print)			Membershi	hip No(Signature)		
			Office Use C	Pnly		
Membership N	umber:			Total Payable:		
Membership Ca	ategory:			Playing Membership Pack provided:		
Entered into Po	wer Golf:	/	/	Post Board Meeting Letter Sent:		