



MEMBERSHIP APPLICATION

PO Box 148 MORTDALE 2223
SECRETARY: 0412 256 499
PRO SHOP: (02) 9534 5024
EMAIL: H.GC@LIVE.COM.AU

I HEREBY APPLY TO BECOME A MEMBER OF THE HURSTVILLE GOLF CLUB INC (HGC).

UPON MY ADMISSION AS A MEMBER I AGREE TO BE BOUND BY THE RULES OF THE ASSOCIATION AND ANY LAWS OR REGULATIONS OF THE CLUB FROM THE TIME BEING IN FORCE.

MORE INFORMATION IS AVAILABLE AT WWW.HURSTVILLEGOLFCLUB.COM.AU

SIGNATURE

DATE:

PERSONAL DETAILS

TITLE
(MR, MRS, MS, DR)

FIRST NAME

SURNAME

DATE OF BIRTH

ADDRESS

CITY

POSTCODE

TELEPHONE

MOBILE

EMAIL ADDRESS

PAYMENT

PLEASE TICK YOUR PAYMENT OPTION

CHEQUE

PAYABLE TO HURSTVILLE GOLF CLUB INC

DIRECT CREDIT / EFT

WESTPAC BANKING CORP.
BSB 032-167
ACCOUNT No: 197614

PLEASE INCLUDE YOUR NAME IN THE PAYMENT REFERENCE.

CREDIT/DEBIT CARD

CARD PAYMENTS ARE MADE IN THE PRO SHOP WITH THE APPLICATION.

CASH

PAYABLE AT THE PRO SHOP WITH THE APPLICATION.

MEMBERSHIP

HAVE YOU BEEN OR ARE YOU A MEMBER OF ANOTHER GOLF CLUB?

Yes No

IF YES:

CLUB NAME

GOLFLINK NO.

WHICH CLUB DO YOU WISH TO HAVE AS YOUR HOME CLUB?

HURSTVILLE GOLF CLUB

OTHER:

MEMBERSHIP

JUNIOR

7 DAY MEMBERSHIP (NO SENIOR DISCOUNT)

6 DAY MEMBERSHIP (EXCLUDES SATURDAYS)

6 DAY SENIOR MEMBERSHIP (EXCLUDES SATURDAYS)

*PLEASE ATTACH PROOF OF AGE FOR JUNIOR AND SENIOR MEMBERSHIP.
E.G. LICENCE COPY, BIRTH CERTIFICATE*

APPLICATIONS ARE SUBJECT TO APPROVAL BY THE MEMBERSHIP COMMITTEE. FULL REFUNDS ARE MADE FOR ANY APPLICATIONS NOT ACCEPTED.

PLEASE ALLOW A WEEK FOR YOUR APPLICATION TO BE PROCESSED. MEMBERSHIP LETTERS WILL BE FORWARDED BY EMAIL AND A NEW MEMBER KIT WILL BE AVAILABLE FOR COLLECTION AT THE PRO SHOP ONCE PROCESSING HAS BEEN COMPLETED.

APPROVED:

DATE:

GOLFLINK No.:

BPAY No.