



CABRAMATTA GOLF CLUB LTD

APPLICATION FOR SOCIAL MEMBERSHIP (White Form)

I wish to nominate for **SOCIAL** membership of the Club.

SURNAME (block letters) _____

CHRISTIAN NAMES (block letters) _____

ADDRESS: _____

OCCUPATION _____ DATE OF BIRTH _____

Phone No: _____ Mobile: _____

***Email Address: (Please Print) _____

APPLICANT'S SIGNATURE _____ Date: _____

Has the candidate previously been a member of the club _____

Is the candidate a member of, or previously been a member of any other affiliated club _____

Has the candidate's name been submitted for Membership with any other club and subsequently been declined or with withdrawn _____

Names of other clubs of which the candidate is a member _____

PROPOSER - block letters Signature Period of Acquaintance

SECONDER – block letters Signature Period of Acquaintance

I certify that the above particulars are correct, and subject to all the foregoing. I hereby apply to be admitted to membership of the Cabramatta Golf Club, and if elected, I agree to be bound by its rules and regulations.

SUBSCRIPTION: \$10.00