



KIAMA GOLF CLUB LIMITED
 Oxley Avenue Kiama Downs 2533
 ABN 19000994589
 Ph 0242377300
 Email kiamagolfclub@kiamagolfclub.com.au
 Web www.kiamagolfclub.com

JUNIOR MEMBERSHIP

8 TO LESS THAN 18 YEARS OF AGE

NAME (Master / Miss)	
ADDRESS	
EMAIL ADDRESS	
PHONE (Home)	MOBILE
BIRTHDATE	NAME OF SCHOOL YOU ATTEND

HAVE YOU PLAYED GOLF BEFORE?	YES	NO
PREVIOUS HANDICAP	PREVIOUS GOLF LINK NUMBER	
DO YOU KNOW THE COURSE RULES?	YES	NO

PROPOSER <i>Must be over 18yrs of age</i>	NAME
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I consider the above nominee an eligible member & have known them for.....years.

PROPOSER'S SIGNATURE	BADGE No
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SECONDER <i>Must be over 18yrs of age</i>	NAME
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SECONDER'S SIGNATURE	BADGE No
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If I am accepted I agree to abide by the rules & Memorandum & Articles of Association of the Golf Club
All applicants under 18 years of age, need a parent or guardian to sign below

PARENT / GUARDIAN.....**DATE**.....

APPLICANT.....**DATE**.....

PLEASE DO NOT FILL APPLICATION OUT IN PENCIL

PLEASE NOTE YOUR NAME AND CLUB STATUS WILL BE DISPLAYED ON THE CLUB'S NOTICE BOARD FOR 2 WEEKS

Annual Subscription \$80 A Junior between 8 – 18 yrs.
 Cash or cheque payment only.

FINANCIAL YEAR – 1st FEBRUARY 2012 TO 31st JANUARY 2013

Card Number	Photo Taken Yes/ No
Card issued by.....Date.....	Contact Phone Number in case of emergency
Rec #..... Date/...../.....By