MEMBERSHIP APPLICATION

buninyong golf

- ☐ FULL
- ☐ FAMILY
- ☐ LOYALTY
- ☐ COUNTRY
- ☐ 23-26 YEAR OLD
- ☐ 18-22 YEAR OLD
- ☐ 14-17 YEAR OLD
- ☐ UNDER 14 YEAR OLD* HANDICAP REQ Y / N
- ☐ FLEXI A - 40 GAME
- ☐ FLEXI B - 30 GAME
- ☐ FLEXI C - 20 GAME
- ☐ COMMUNITY/SOCIAL

PERSONAL INFORMATION

NAME

DATE OF BIRTH

ADDRESS

PHONE

EMAIL

OCCUPATION

SIGNATURE

HANDICAP HISTORY

HAVE YOU EVER HELD A GOLF HANDICAP? Y/N

IF YES - DETAILS OF MOST CURRENT GOLF ID (GOLFLINK) NUMBER

IF NO - I HAVE NEVER HELD AN OFFICIAL AUSTRALIAN HANDICAP OR RECOGNIZED OVERSEAS EQUIVALENT - TICK ☐

*FOR FULL TERMS & CONDITIONS PLEASE SEE MEMBERSHIP BROCHURE OR WWW.BUNINYONG.GOLF

Office Use Only			
Payment Amount	Receipt No/Date		
Direct Debit Y/N	Add Contact ☐ Memb Email ☐ Welc Email ☐		
Members Details Input	Board Approval Date		
Card Given/Sent	Letter Sent		
Member No.		Pasword MiClub ☐ Add GolfID ☐	
Contacted - Notes		Scanned to MiClub ☐ Club Docs ☐	


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