

# SOUTH WEST ROCKS COUNTRY CLUB

## MEMBERSHIP APPLICATION FORM

First name: \_\_\_\_\_ Surname: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Locker Number: \_\_\_\_\_  
Residential Address: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Postal Address: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

### MANDATORY MEMBERSHIP FEES

 You must select one of the below options

Country Club **\$11.00**     Life Member **\$0.000**     Junior Member **\$2.20**

### SUB CLUB MEMBERSHIP CATEGORIES

Men's Golf **\$260.00**     Ladies Golf **\$260.00**     Junior Golf **\$40.00**  
 Men's Bowls **\$140.00**     Ladies Bowls **\$130.00**     Social Bowls **\$80.00**  
 Tennis **\$60.00**     Junior Tennis **\$20.00**     Locker Fee **\$10.00**

### STORAGE SHED ANNUAL FEES

Electric Cart **\$300.00**     Petrol Cart **\$225.00**     Scooter / Bikes **\$185.00**     Pull Buggy / Clubs **\$125.00**

### SUB CLUB NOMINATIONS

 Sub club applications are required to be proposed and seconded by sub club members

Proposed by: \_\_\_\_\_ Member Number: \_\_\_\_\_ Signature: \_\_\_\_\_  
Seconded by: \_\_\_\_\_ Member Number: \_\_\_\_\_ Signature: \_\_\_\_\_

### GOLFLINK DETAILS

 If joining golf you must complete the following options

Do you or have you previously held a Golf Australia handicap     Yes     No  
I wish for SWRCC to be my nominated home club     Yes     No  
Golflink Number: \_\_\_\_\_ Home Club: \_\_\_\_\_

### SIGNATURE

I hereby apply for membership of the South West Rocks Country Club Limited and if admitted I agree to be bound by and so comply with the constitution and by-laws of the Club. I also declare I have attained the age of 18 years, and the date of birth stated on this application is correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### STAFF USE ONLY

 One (1) type of photo ID or three (3) types of non-photo ID required

Membership Number: \_\_\_\_\_ Amount: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

#### PHOTO ID

Drivers Licence: \_\_\_\_\_  
 Passport: \_\_\_\_\_  
 Photo Card: \_\_\_\_\_

#### NON-PHOTO ID (Bank/Credit Card, Government Issue, Medicare)

ID 1: \_\_\_\_\_  Card No: \_\_\_\_\_  
 ID 2: \_\_\_\_\_  Card No: \_\_\_\_\_  
 ID 3: \_\_\_\_\_  Card No: \_\_\_\_\_

Date: \_\_\_\_\_ Staff name (Please print full name): \_\_\_\_\_

**South West Rocks Country Club Membership Privacy Statement:** The South West Rocks Country Club is subject to the provisions of the Privacy Act 1988. The personal information provided by you on this form/application and attached documents will be used to process this membership application. Failure to provide all of the requested information may result in your application being rejected. You have a right to access and correct any of your personal information that the Club holds about you. The Club does not usually disclose your personal information to any other organisation or person unless there is a legal requirement to do so. The Club may disclose your information to third parties that provide services under contract to the Club. These contracts require the third party to keep your personal information confidential and secure. Your personal information, including information about you obtained as a result of you placing your membership card in a gaming machine or other club device (not ATMs), may be used by the Club for marketing purposes to improve our services and to provide you with the latest information about those services and any new related services and promotions. *Form: 2015-2016*