

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 **\$0.00** Junior Member **\$2.20**

SUB CLUB MEMBERSHIP CATEGORIES

<input type="checkbox"/> Men's Golf \$270.00	<input type="checkbox"/> Ladies Golf \$270.00	<input type="checkbox"/> Social Bowls \$80.00
<input type="checkbox"/> Men's Bowl \$150.00	<input type="checkbox"/> Ladies Bowl \$140.00	<input type="checkbox"/> Social Golf (multi member) \$100.00
<input type="checkbox"/> Tennis \$65.00	<input type="checkbox"/> Junior Tennis \$25.00	<input type="checkbox"/> Junior Golf \$60.00
		<input type="checkbox"/> Junior Bowls \$60.00
		<input type="checkbox"/> Locker Fee \$10.00

STORAGE SHED ANNUAL FEES

Electric Cart **\$325.00** Petrol Cart **\$225.00** Scooter / Bikes **\$190.00** 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



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South West Rocks Country Club practices the responsible service of alcohol

