



## Appendix A

# SWRCC Life Membership Nomination Proposal Form

### The Nominee

Nominee's Name: \_\_\_\_\_

Member Number: \_\_\_\_\_ Membership Type: \_\_\_\_\_

Category of Life Membership:      **CLUB**      **GOLF**      **BOWLS**      **TENNIS** (please circle)

### The Proposer

Proposer's Name: \_\_\_\_\_

Members Number: \_\_\_\_\_ Membership Type: \_\_\_\_\_

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

*I propose the above-mentioned financial nominee of the club for Life Membership of South West Rocks Country Club Ltd effective from the next annual General Meeting of the Association (if nomination is endorsed by the Board of Directors & approved at that General Meeting).*

**Note: The person "seconding" this nomination, must sign at the end of the document, after it has been completed.**

To help in considering and in assessing the nomination, please tell us a bit about the nominee under the following headings (where applicable).

1. **Does the nominee meet the requirements listed in the Criteria Section? YES / NO**
2. **Detail the ways in which the nominee has made a significant contribution to the performance of the SWRCC over an extensive period of time. As accurately as you can please list the roles that the nominee has performed for the Club. (A full historical listing of committee positions should be put forward to assist with this.**

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**3. Detail the ways in which the nominee has made a significant contribution to the success of the SWRCC over an extended period of time? What do you think sets their contribution apart? – What makes their contribution special? As accurately as you can please list these in details.**

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**4. Please add a separate sheet if required with any other details that you would like to be considered with regards to this nomination and any additional information for the above sections. Sheet attached YES / NO**

We have read the criteria for the awarding of life membership and believe that this nominee meets or exceeds the criteria and that they have made a meritorious contribution to the South West Rocks Country Club Inc as detailed above. We submit this application for Life Membership for consideration.

**Seconded By:**

Seconders Name: \_\_\_\_\_

Member Number: \_\_\_\_\_ Membership Type: \_\_\_\_\_

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

**To be Assessed and Completed by the Board of Directors**

CRITERIA ASSESSED	RESULT	OUTCOME
<ul style="list-style-type: none"> <li>• Significant &amp; sustained contribution exceeding a typical expectations of regular membership</li> <li>• Long term service a minimum of 10 years</li> <li>• Positive impact on the Clubs goals and values</li> <li>• Strong leadership role</li> <li>• Active role or position of Club influence (Board, committee, Volunteer, High Representation)</li> <li>• No Code of Conduct infringements during the duration of membership.</li> <li>• Positive impact to the club in a beneficial &amp; measurable way.</li> </ul>	<p>Confirmed YES / NO</p>	<p><b>Level 1</b> Meets criteria at Highest Level / Highly Qualified for the award of Life Membership</p> <p><b>Level 2</b> Merts Criteria / qualified for Award of life membership</p> <p><b>Declined</b> Does not meet the criteria for the award of Life Membership</p>

Nomination for Life Membership Approved or Declined (please circle)

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