



# The Orford Golf Club Inc

PO Box 300, Orford, Tasmania, 7190

[admin@orfordgolfclub.com.au](mailto:admin@orfordgolfclub.com.au)

## Your Details

Full Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Email address\* \_\_\_\_\_

\* Juniors also to include parent/guardian email address for billing purposes

Postal Address \_\_\_\_\_

## Membership at any other Golf Clubs

Club Name: \_\_\_\_\_

GolfLink Number: \_\_\_\_\_ Handicap \_\_\_\_\_

## Membership Category

Full Membership (\$520)\*

Introductory Membership (\$208)

Secondary Membership (\$390)\*

Junior/ Full-time Student Membership (\$80)

Social Membership (\$25)

\* Reduced amount after March

I agree to abide by the rules of the Orford Golf Club and consent to the nomination.

.....

Signature of Nominee

.....

Date

### PROPOSER:

.....

Name

.....

Signature

.....

Date

### SECONDER:

.....

Name

.....

Signature

.....

Date

**NOTE:** MEMBERSHIP FEES MUST BE PAID **AT TIME OF APPLICATION** EITHER AT THE BAR OR BY BANK DEPOSIT TO: Orford Golf Club - BSB 633 000 Account Number 160 118 246 (use your surname as reference). Applications will not be considered until payment is made. It will be fully refunded if for any reason your application is declined.

Date paid: ..... Date Approved ..... Date notified: .....