

Hill Top New Membership Application Form

I desire to become a member of **HILL TOP GOLF and COUNTRY CLUB Limited** (the Club) and hereby agree, if elected, to be bound by the Rules of association, By-Laws of the Club and all club policies, as amended or altered from time to time and with the present form, of which I am familiar.

I, Mr/Mrs/Miss/Ms

Surname

Given Name

Preferred Name

Postal Address.....

Suburb State Post Code

Residential Address.....

Suburb State Post Code

Tel No's: Home Mobile.....

Email.....

Date of Birth Emergency Contact

Emergency Relationship Emergency Phone.....

Profession or Occupation Bus Tel No.....

Membership Type

Have you ever been a member of Hill Top Golf and Country Club before?

- No
 Yes. Date you last Joined Hill Top?

Do you reside thirty kilometres or more from the Club Premises, or reside at least fifteen kilometres from the Club premises and be a member of another Golf Club?

- No Yes

Do you permanently reside seventy kilometres or more from the Club premises?

- No Yes

Refer to Club BY_LAWS for clarification of MEMBERSHIP CATEGORIES & DEFINITIONS

- | | | | | |
|---|---|---|---|--|
| <input checked="" type="radio"/> Golf & Bowls | <input checked="" type="radio"/> Golf Only | <input checked="" type="radio"/> Bowls Only | <input checked="" type="radio"/> Junior | <input checked="" type="radio"/> Non-Playing |
| <input type="checkbox"/> Golf & Bowls - \$630 | <input type="checkbox"/> Golf Playing - \$630 | <input type="checkbox"/> Bowls - \$180 | <input type="checkbox"/> Cadet under 13 - \$20 | <input type="checkbox"/> Social - \$20 |
| <input type="checkbox"/> Golf & Bowls Senior aged 70+ - \$475 | <input type="checkbox"/> Golf Senior aged 70+ - \$475 | | (No Handicap) | |
| | <input type="checkbox"/> Golf Country 30 Km's away- \$475 | | <input type="checkbox"/> Junior aged 13-17 - \$65 | |
| | <input type="checkbox"/> Golf Intermediate One-aged 18-20 \$210 | | | |
| | <input type="checkbox"/> Golf Intermediate Two aged 21-29 - \$475 | | | |
| | <input type="checkbox"/> Golf Remote 70 Km's away - \$260 | | | |
| | <input type="checkbox"/> Golf Summer (Oct-Mar) - \$380 | | | |
| | <input type="checkbox"/> Golf Winter (Apr-Sep) - \$310 | | | |
| | <input type="checkbox"/> Golf 3 Day (Sun, Mon, Tue and No Handicap) - \$210 | | | |

Golf Membership

Please note, original cards which have been verified by a current holder of an AGU handicap are required when allocating a new handicap.

Do you have a current AGU/Golflink number or have had one in the past?

No

Yes, What is it?

Where is it held?

What is the Exact Name on the Card?

Handicap, if known.

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What Club would you like to use as your Home Club for handicapping? (Please note, you must be a current member of the Club that you are requesting as your Home Club.)

Hill Top or Current Club

GOLF CARTS: Do You Own a Golf Cart Yes No

Have you registered it with the club? Yes, Registration Number, No

Privacy Statement

From time to time, Hill Top Golf and Country Club may send you information about our Club services and/or promotions. We respect your privacy, so please let us know if you do not wish to receive information from us.

Please keep me up to date with what's happening around the club

Yes No

Payment Methods

1. Payment in full: EFT EFTPOS Cheque Cash

2. Payment by monthly direct debit: Monthly Direct Debit*

* Direct Debit payments will be taken on the 15th of each month and include a \$3.50 per month administration fee. Please obtain a direct debit authority form from either the office or download from our website.

Declaration

I declare that the information provided by me is true and correct.

Accident, damage or loss insurance not included.

Candidate's signature:

Date:

For Office Use Only

Date application received:

Category:

Letter Sent:

Membership Card Sent:

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