



# Broadford Golf Club Inc.

Horwood Rd, Broadford VIC 3658  
Phone: 03 5784 1092,  
Email: [broadfordgolfclub@bigpond.com](mailto:broadfordgolfclub@bigpond.com)

### APPLICATION FOR MEMBERSHIP

I desire to become a member of the Broadford Golf Club Inc, and I agree, if elected, to be BOUND BY THE RULES AND BY-LAWS OF THE CLUB. I agree that the Board of BGC has the right to revoke my Membership at their discretion.

The following are my correct personal details.

FULL NAME.....

ADDRESS .....P/CODE.....

OCCUPATION.....DATE OF BIRTH...../...../.....

PHONE NUMBER(H).....(W).....(MOB).....

EMAIL ADDRESS .....

HAVE YOU BEEN A FINANCIAL MEMBER OF ANY GOLF CLUB SINCE 2000 Y/N .....

IF YES, PLEASE PROVIDE PREVIOUS GOLFLINK NUMBER.....

#### TYPE OF MEMBERSHIP APPLIED FOR (Please)

TYPE	COST P.A.	TYPE	COST P.A.	TYPE	COST P.A.
ORDINARY	\$510.00	JUNIOR	\$50.00	5 DAY MEMBER	\$365.00
SPOUSE OF MEMBER	295.00	COUNTRY MEMBER	\$410.00	CORPORATE	\$820.00
LOCAL FAMILY	\$815.00	SPOUSE COUNTRY	\$245.00	SOCIAL (NON PLAYING)	\$50.00
1 <sup>st</sup> YEAR OFFER	\$310.00	COUNTRY FAMILY	\$665.00	SPECIAL 6 MONTHLY	\$300.00

All prices include GST

I enclose a cheque for \$..... being the total amount of my annual subscription.

SIGNATURE.....DATE...../...../.....

PROPOSERS NAME.....SIGNATURE.....DATE...../...../.....

SECONDRS NAME.....SIGNATURE.....DATE...../...../.....

### OFFICE USE ONLY

Displayed on notice board. Date...../...../.....

Paid \$..... Receipt No..... Receipt Date ...../...../.....

Membership Number & Bag Tag Issued No. .... Date ...../...../.....

Full Payment Received.....Treasurers Signature.....