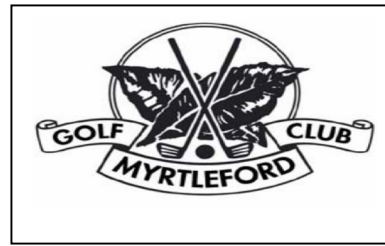


**MYRTLEFORD GOLF CLUB  
INCORPORATED**

**MEMBERSHIP APPLICATION FORM**



Please complete both pages and send to

Myrtleford Golf Club, PO Box 331 Myrtleford 3737

<b>Family Name</b>	
<b>Given Names</b>	
<b>Title</b>	
<b>Residential Address</b>	
<b>Postal Address (if different)</b>	
<b>Telephone Number</b>	
<b>Mobile Phone Number</b>	
<b>Email address</b>	
<b>Date of Birth</b>	
<b>Previous Golf Club</b>	
<b>Current Golflink Number</b>	
<b>Current Handicap</b>	

## Myrtleford Golf Club Incorporated Membership Application form Page 2.

I, the person whose details appear above, wish to apply to become a member of the Myrtleford Golf Club Incorporated in the following category.

<b>Membership Category</b>	
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I advise that I support the purpose of the Association and in the event that my membership application is accepted by the Association, I agree to be bound by the Rules of the Association that are in place whilst I remain a member.

<b>Signed</b>	
<b>Date</b>	

I, a current member of the association, nominate the above named person for membership of the association.

<b>Current Member Name</b>	
<b>Signature</b>	
<b>Date</b>	

I, a current member of the association, second the above named person for membership of the association.

<b>Current Member Name</b>	
<b>Signature</b>	
<b>Date</b>	

<b>Secretary's Use Only</b>		
Date Received		
Date of Committee Consideration		
Date of Notification		