

Eketahuna Golf Club Inc

New Membership Proposal

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
|  |  |
|  |  |
| Contact No: |  |
| Email: |  |
| Date of Birth: |  |
|  |  |

Membership Type Required (please circle one)

Full Playing / Country / City / Junior / Social / New Golfer

Proposer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

One of these must be a committee member

Seconder:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to accept this nomination under clause 14 of the club’s constitution, to pay my annual subscription and to abide by the rules of the club. I have no outstanding subscriptions or dues owing to another golf club.

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

Secretary to Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_