

Friends of Southport
Membership application

Proposed by..... Membership #.....

I propose.....who has been known to me foryears and from my personal knowledge I consider to be an eligible Member in every way.

Signed by Proposer.....

Applicants full name.....

Postal address.....

Occupation..... Business.....

Home Phone..... Mobile.....

Date of Birth.....

Email.....

- I agree to abide by the dress code, policies and Constitution and By-Laws of Southport Golf Club and understand that failure to do so may result in my membership being revoked.
- I understand that Friends of Southport membership has no golf playing or practice entitlements and I am not eligible for members draw cash prizes.
- I hereby acknowledge that this membership application is subject to Board approval. I understand that my membership will be approved or declined at the next Board meeting. Should the application be declined I understand that I will be contacted in writing and the annual fee returned.

Signature of applicant..... Date.....

Office use: Approved by..... Date..... Payment.....

Membership number allocated..... Card and letter issued.....

Southport Golf Club, Slatyer Avenue, Southport Qld 4215

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