

PROPOSAL FOR MEMBERSHIP 2024

Euroa Golf Club Inc
 55 Golf Course Road
 PO Box 53
 Euroa Vic 3666
 secretary.euroagolfclub@gmail.com
 www.euroagolfclub.com



A.B.N: 93478187663 / ACN0007222A

Registered with Golf Victoria, Affiliated with the D.D.G.A

Registered under the Victorian Licensing Act

18 holes: Men's par 72 ACR 71: 5884 metres/Women's par 72 ACR 70: 5069 metres

MEMBERSHIP CATEGORIES

All categories include GST - tick category

Ordinary Playing (Full) <i>includes GolfLink</i>	\$560	
Pensioner (A copy of Commonwealth pension card must be provided with application) <i>includes GolfLink</i>	\$460	
Country (reside 42 to 99km from clubhouse) <i>includes GolfLink</i>	\$380	
Country 100 (reside 100km or more from clubhouse) <i>includes GolfLink</i>	\$200	
Junior 18 – 21 yrs <i>includes GolfLink</i>	\$195	
Junior under 18 yrs <i>includes GolfLink</i>	\$55	
Limited – Social Golf, No GA Handicap	\$290	
Introductory (to golf) (for new golfers, conditions apply, see website for details)	\$200	
Summer (1/10/24 – 31/3/25)	\$290	

APPLICANT DETAILS

Full Name		Male/Female
Home Address		Postcode
Postal Address		Postcode
Email		Telephone No
Occupation		DOB
Former Home Club (If applicable)	Do you wish to be handicapped by Euroa Golf Club Inc - Yes No	
	Please tick if you DO NOT want your contact details made available to other members of Euroa Golf Club	
Current Handicap Details	GolfLink No.	Current Handicap

I, _____ hereby apply for membership of the Euroa Golf Club Inc.

I agree, if elected, to be bound by the Rules and By Laws of the Euroa Golf Club Inc.

Signature of Applicant: _____ **Date:** _____

The above candidate is personally known to us and we believe him / her to be a suitable person to be elected as a member of the Euroa Golf Club Inc.

Nominated By: (Print Name) _____ **Signature:** _____

Seconded by: (Print Name) _____ **Signature:** _____

Submit this application to Euroa Golf Club Membership Co-ordinator David Baker djb17bjd@gmail.com Ph: 0437663881 with payment by cash, cheque or EFT. Account details for EFT payments are: **Euroa Golf Club Inc. BSB: 803 078**

Account No: 100029930. Please **put your full name as a reference for your payment.** Membership is for the calendar year and will be due for renewal on Jan 1st 2025

Office Use	Payment Received		Letter sent to applicant		Handicapper Advised	
	Date of Committee Approval		Database Updated			

