

## PROPOSAL FOR MEMBERSHIP 2026

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*

<b>Ordinary Playing</b> (Full) <i>includes GolfLink</i>	<b>\$720</b>	
<b>Pensioner</b> (A copy of Commonwealth pension card must be provided with application) <i>includes GolfLink</i>	<b>\$600</b>	
<b>Country</b> (reside 42 to 99km from clubhouse) <i>includes GolfLink</i>	<b>\$490</b>	
<b>Country 100</b> (reside 100km or more from clubhouse) <i>includes GolfLink</i>	<b>\$260</b>	
<b>Junior 18 – 21 yrs</b> <i>includes GolfLink</i>	<b>\$250</b>	
<b>Junior under 18 yrs</b> <i>includes GolfLink</i>	<b>\$70</b>	
<b>Limited</b> – Social Golf, No GA Handicap	<b>\$375</b>	
<b>Introductory (to golf)</b> (for new golfers, conditions apply, see website for details)	<b>\$240</b>	
<b>Summer (1/10/26 – 31/3/27)</b>	<b>\$375</b>	

### 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.	GolfLink Home Club
		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 [secretary.euroagolfclub@gmail.com](mailto:secretary.euroagolfclub@gmail.com) Ph: 0418 368 540 with payment by cash 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 1<sup>st</sup> 2027.**

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

