

## YALLOURN GOLF CLUB

## APPLICATION FOR MEMBERSHIP 2023/24

GOLF LINKS ROAD, YALLOURN HEIGHTS, PO BOX 42 NEWBOROUGH 3825 51276962 ygc@yallourngolfclub.com.au WWW.YALLOURNGOLFCLUB.COM.AU

THANK YOU FOR YOUR INTEREST IN THE YALLOURN GOLF CLUB.
TO APPLY FOR MEMBERSHIP, PLEASE FILL IN THIS FORM AND RETURN IT TO THE CLUBHOUSE,
ALONG WITH A \$40 APPLICATION FEE TO BE DEDUCTED FROM FULL FEE IF ACCEPTED

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CONTACT DETAILS	MEMBERSHIP CATEGORY 2023 - 2024
□ Mr □ Mrs □ Miss □ Ms □ Other (specify)	
First Name	
Address	□ 9 HOIE4 \$370
Date of Birth / / Occupation	☐ Junior see separate form☐ Social (non-play)4 \$20
Phone Number (H)	
Previous Club (if applicable)	)
Golf Link Number (if applicable)	
Emergency Contact: Name	r
If you would like to receive emails of news and upcoming ev	
please provide your email address:	
How did you hear about us? $\square$ Television $\square$ Radio $\square$ Newspaper $\square$ Inter	net 🗆 Other
TERMS 1: Pensioner membership is available to all persons over the age of 65 upon pension card	presentation of a valid
2: Country membership is available to all persons who live in a town where it from the Yallourn Golf Club Clubhouse	
3: Student membership is available to persons between the age of 21-25 who full-time student card at the time of application	-
4:These memberships do not include a golf handicap, it can be added to Junio	or Memberships for \$50
DECLARATION I, the applicant whose details appear above, desire to join the Yallo I agree to accept the Committee decision in respect of this applicat my name be entered on the Membership Registry.	
Proposer Name	Date / /
Seconder Name	Date / /
SIGNATURE OF APPLICANT	Date / /
OFFICE USE ONLY	
Application Fee \$	