

# **Membership Application**

Full Year Membership: 1<sup>st</sup> October – 30<sup>th</sup> September

Membership Type: (Please Tick)						
Golfing Current member RENEWING NEW Full Member Pensioner Member (Proof Required) Mid-Week Member (Mon-Fri only)	BULK GREEN FEES Adult Golfing Member Junior Member (Plays 18 Holes) Junior Intermediate Member Junior Pee Wee					
<ul> <li>Junior Member (Plays 18 Holes)</li> <li>Junior Intermediate Member (Plays 3-6-9 holes)</li> <li>Junior Pee Wee Member (3-7 Years Old)</li> <li>Non Golfing</li> <li>Social Member (Clubhouse Only)</li> </ul>	Clubs & Member Values Veteran Club (Female over 50   Males over 55) + \$10.00 Husband & Wife Membership Family Memberships Petrol Buggy Shed Electric Buggy Shed Locker					
PLEASE FILL OUT FOR EACH MEMBER						
Title: Given Names:						
Surname: Known As:						
Home Address:						
Suburb:	Postcode:					
Mailing Address:						
Suburb:	urb: Postcode:					
Phone: (Home)						
(Mobile)						
Email Address:						
Date of Birth: / / Occupation:						
dd/mm/yyyy GOLFING DETAILS						
Previous Golf Club:						
Golf Link Number:						
Home Club for Golf Link: Transfer existing Golf Link to PVGC? YES / NO						
email: <a href="mailto:pioneervalleygolf@bigpond.com.au">pioneervalleygolf.com.au</a> website: <a href="mailto:www.pioneervalleygolf.com.au">www.pioneervalleygolf.com.au</a>						

Phone: (07) 4959 1277 Fax: (07) 4959 1182 Address: 247 Leichardt Road | PO Box 91 | Mirani Qld 4754



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Full Year Membership: 1<sup>st</sup> October – 30<sup>th</sup> September

Membership Proposed by (Print):	Membership No:
Signature:	Date:
Seconder (Print):	Membership No:
Signature:	Date:

### Proposer and Seconder for golf memberships must be financial golfing members

#### Declaration

I, the undersigned, am over the age of 18 years, and I agree, if accepted as a Member, to abide by the Rules, Code of Conduct, Regulations and By-Laws of the Club. For members under the age of 18, a parent or guardian must accept these conditions on your behalf. Please note renewal is not automatic and the PVGC can reject your renewal of membership if there are grounds due to failure to abide by the Code of Conduct and/or your conduct throughout the year has had a detrimental effect on players and/or PVGC.

By completing this application golf members are also agreeing to abide by the Rules of Golf.

Please note that in making application for Playing Membership of the Club, you acknowledge and accept that you will be subject to the Golf Australian Handicapping System and your handicap may be reviewed at the absolute discretion of the Golf Committee on the basis of any cards returned in any competition. Please note membership fees are NON refundable.

Members who elect to pay by installments are responsible for the payment of the whole of the annual subscription.

#### **Privacy Statement**

Pioneer Valley Golf Club is subject to the provisions of the Privacy Act 1988. The personal information provided by you on this application will be used to process your Membership Application. Failure to provide all of the requested information may result in your application being rejected. You have the right to access and correct any of your personal information that the Club holds about you.

The Club does not usually disclose your personal information to any other organization or person unless there is a legal requirement to do so. The Club may disclose your information to third parties that provide services under contract to the Club.

These contracts require the third party to keep personal information confidential and secure.

Your personal information, including information about you obtained as a result of you placing your membership card in a gaming or other club machine (not ATM's), may be used by the Club for marketing purposes to improve our services and to provide you with the latest information about those services and any new related services and promotions.

Signature:	X		/
			dd/mm/yyyy

Signature of parent or quardian if under 18 years of age

X ...... Date: ..../ / ......

ld/mm/yyyy

#### **STAFF USE ONLY**

ID TYPE	Drivers License	Passport	Pension Card	Other	
Total Cost:	\$			Amount Paid:	\$
Receipt#:				Staff Signature	:
Golf Member#	:			Date:	