



# Wingate Park Country Club

Membership No:
Computer No:

## APPLICATION FORM FOR MEMBERSHIP AT WINGATE PARK COUNTRY CLUB

### BOWLS SECTION

Tel 012 997 1312  
Fax 012 997 1104

CLASS OF MEMBERSHIP APPLIED FOR: (PLEASE TICK)

FOUNDATION	<input type="checkbox"/>	FULL MEMBER	<input type="checkbox"/>	JUNIOR	<input type="checkbox"/>
------------	--------------------------	-------------	--------------------------	--------	--------------------------

THE FOLLOWING PARTICULARS RELATE TO ME:

FULL NAME: \_\_\_\_\_

ID NO: \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

RESIDENTIAL TEL NO: \_\_\_\_\_ CELLNO: \_\_\_\_\_

POSTAL ADDRESS: \_\_\_\_\_

BUSINESS TEL NO: \_\_\_\_\_ BUSINESS FAX NO: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

APPLICANTS OCCUPATION & BUSINESS ADDRESS: \_\_\_\_\_

NAME OF OTHER CLUBS OF WHICH YOU ARE/HAVE BEEN A MEMBER: \_\_\_\_\_

HAS YOUR MEMBERSHIP EVER BEEN TERMINATED BY ANY OTHER CLUB? \_\_\_\_\_

IF YES, STATE REASON: \_\_\_\_\_

PLAYING POSITION : \_\_\_\_\_

TECH OFF # : \_\_\_\_\_

COACH # : \_\_\_\_\_

Please attach the following to this application:

\* Clearance from previous club,

If elected to membership, I hereby fully abide by the constitution of Wingate Park Country Club.

I accept that the annual subscription fee is due and payable on the 1st of July each year.

Resignations must be in writing, prior to that date failing which I will be held liable for the following years subscription.

Date: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

PROPOSED BY (Please print) \_\_\_\_\_

SECONDED BY (Please print) \_\_\_\_\_

(Signature) \_\_\_\_\_

(Signature) \_\_\_\_\_

PERIOD APPLICANT HAS BEEN KNOWN AND WHETHER SOCIALLY OR BUSINESS: \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
Applicant has been interviewed by me. _____	Signature of Chairman _____
Class of Membership recommended _____	
Signature of Committee Member: _____	