

Receipt no.

NOMINATION FOR CADET MEMBERSHIP

(UNDER 12)

374–514 David Low Way, Bli Bli Qld 4560 **P:** 07 5373 1000 **F:** 07 5373 1099 **E:** admin@maroochyrivergolfclub.com.au www.maroochyrivergolfclub.com.au

I (name)		wish to apply for 0	Cade	et Membe	ership of the Maroochy	River
Golf Club and if elected	to Memb	pership will abide by the Maro	ochy	y River C	Solf Club Rules and By	-Laws
(available from Club reception). I believe my membership will be compatible with existing members and I am						
joining the Club to play the game of golf.						
Signature of Nominee: Date:						
PERSONAL DETAILS	OF NON	MINEE				
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House/Unit No. & Street						
Suburb				Postcode	e	
Postal Address						
Phone	Home	Mo	bile	No.		
Email						
Date of Birth		<u> </u>				
Emergency Contact	Name		M	obile		
Relationship						
PRIVACY STATEMENT Maroochy River Golf Club is committed to the privacy of your personal information						
such as your name, address, gender, etc supplied by you in your interaction with the Club under the Privacy						
Act 1988 (C'wth). The Club will only collect your personal information that is necessary for it to meet or fulfil its activities and function. The Club will put in place appropriate measure to safeguard your personal information.						
MEMBERSHIP FEES						
There is no nomination fee for Cadets. Membership fees may be viewed on our website.						
Please drop the completed form and payment in to: Maroochy River Golf Club, 374–514 David Low Way, Bli Bli NSW 4560						
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OFFICE USE ONLY						ı
Date nomination						
received		Amou	nt Pa	aid: \$		