



# MEMBERSHIP WAITING LIST APPLICATION

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## PERSONAL DETAILS OF WAITING LIST APPLICANT

FIRST NAME	
SURNAME	
PHONE NUMBER	
HOME ADDRESS	
EMAIL ADDRESS	
DATE OF BIRTH	

PLEASE SELECT WHICH MEMBERSHIP CATEGORY YOU WISH TO NOMINATE FOR:

(NB—YOU CAN SELECT BOTH CATEGORIES)

 7-DAY 6-DAY

### PAYMENT REQUIRED—\$100

*Payment of \$100 is required to place your name on the Membership Waiting List. At the time of payment, you will be provided with a card that carries \$100 Food & Beverage Credit. This Credit will not expire, and can be put towards purchases at the Cane Cutters Bar & Bistro.*

PLEASE SELECT YOUR PAYMENT OPTION: (American Express not accepted)

 CREDIT CARD  
(Please enter details below) CASH AT RECEPTION CREDIT CARD AT RECEPTION

CARD NUMBER	
EXPIRY DATE	
CVV	
SIGNATURE	

### OFFICE USE ONLY

Date Received		Amount Paid	
Waiting List #		Staff Sign	