



Elderslie Golf Club Inc.

Andersons Road Broadmarsh
PO Box 311 Brighton Tasmania 7030
Telephone (03) 6268 5292
www.eldersliegolfclub.com.au
ABN 34 172 407 252

Nomination for Membership

Personal Details

Title: Mr / Mrs / Ms / Miss

Name: _____

Address: _____

_____ Postcode _____

Telephone Home _____

Work _____ Date of Birth _____

Mobile _____ Occupation _____

Please give details of the last club at which you were a member

Name of Club _____ Which years _____ Handicap _____

Golf Link Number _____

Proposal

Membership Type: Full _____ Associate _____ Junior _____
Under 18 years as at January 1 each year
Fee Applicable \$ _____

Proposed Name: _____ Signature: _____

Seconder Name: _____ Signature: _____

Both the Proposer and Seconder must have been members for at least two years and must be over the age of 18 years.

Declaration

I declare that the details provided are true in all respects. I agree to abide by the rules of the Elderslie Golf Club and the rules of golf.

Signature: _____ Date: _____

The Elderslie Golf Club respects your privacy. Your personal details will remain confidential, will only be used to conduct official club business and will not be disclosed to any other parties except to the applicable affiliation organisations.

Send the completed form to the Club at PO Box 311, Brighton TAS 7030, drop off at the Club or pass to a Committee Member.



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Office use only

Date Processed: _____ Receipt Number: _____ Amount received: _____
Roster/Letter sent Y / N Database updated Y / N Handicapper notified Y / N