



APPLICATION FOR MEMBERSHIP

PLEASE COMPLETE IN BLOCK LETTERS

APPLICANT FULL NAME Mr. Mrs. Miss Ms Dr Prof. _____

CATEGORY REQUIRED (Individual, Couple, Family, Founding, Resort/Hotel, Corporate, Honorary) _____

DETAILS OF APPLICANT (Over 18 years)

POSTAL ADDRESS _____

 _____ POSTAL CODE _____

HOME TELEPHONE () _____

WORK TELEPHONE () _____

CELLPHONE NUMBER _____

EMAIL ADDRESS _____

DATE OF BIRTH / / _____ GENDER M / F _____

ID NUMBER _____

OCCUPATION _____ EMPLOYER _____

LAST OFFICIAL HANDICAP _____ CLUB WHERE YOU ARE HANDICAPPED _____

MEMBERSHIP NUMBER _____

Name the golf club you were previously a member of _____

Have you ever been requested to resign from, or refused membership of, any golf club? If so, please provide details.

I hereby apply for membership of De Zalze Golf Club and I undertake to be bound by the Rules, Regulations and Byelaws, which are in force now and hereafter. I also agree to read and follow the rules and etiquette of golf.

DATE / / _____ SIGNATURE _____

DETAILS OF APPLICANT IF UNDER 18

FULL NAMES OF PARENT/GUARDIAN _____

POSTAL ADDRESS OF PARENT/GUARDIAN _____

 _____ POSTAL CODE _____

CONTACT NUMBER OF PARENT/GUARDIAN _____

EMAIL ADDRESS OF PARENT/GUARDIAN _____

DATE OF BIRTH / / _____

SEX M / F _____

LAST OFFICIAL HANDICAP _____ CLUB WHERE YOU ARE HANDICAPPED _____

MEMBERSHIP NUMBER _____

I hereby apply for membership of De Zalze Golf Club and I undertake to be bound by the Rules, Regulations and Byelaws, which are in force now and hereafter. I also agree to read and follow the rules and etiquette of golf.

DATE / / _____ SIGNATURE OF PARENT/GUARDIAN _____

SIGNATURE OF APPLICANT _____

DECLARATION BY HOME OWNER

I, Mr. Mrs. Miss Ms Dr Prof. _____, as the registered home owner, company or trust representative of Erf _____ at the De Zalze Winelands Golf Estate. I declare that this candidate satisfies the conditions for membership as contained in the constitution of the De Zalze Golf Club.

DATE / / _____ SIGNATURE _____

FOR CLUB USE ONLY

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|-------------------------------|-------|-------|------|-------|-------|
| Membership Valid From | / | / | To | / | / |
| MANAGEMENT SIGNATURE | _____ | _____ | DATE | _____ | _____ |
| CLUB REPRESENTATIVE SIGNATURE | _____ | _____ | DATE | _____ | _____ |