INDOOROOPILLY GOLF CLUB MEMBERSHIP APPLICATION

PERSONAL DETAILS

Title _			
Full Name _			
Preferred Name	Date of Birth		
Home Address			
Postal Address _			
Mobile _	Home Phone		
Email _			
Occupation _	Employer		
Emergency Contac	ct Name and Number		
CATEGORY			
Full Member			
Restricted Member Clubhouse Member			
Country Me	mber		
GOLF DETAILS			
	or have previously been a member of another Golf Club, please advise): 	
Club Name			
Golf Link Number	Golf handicap		
Make Indooroopilly	y Golf Club my home club? YES NO		
FAMILY MEMBER	RS o any current members of the club, please provide details:		
Name			
Relationship			
		Ŵ	

MEMBERSHIP DECLARATION

I confirm that the details provided above are true and correct.

If approved by the Board as a member of Indooroopilly Golf Club, I will undertake to abide by the Rules of the Club and acknowledge that the Club may at any time suspend, revoke or terminate my membership if it becomes aware of any matter which may have the potential to be detrimental or prejudicial to the interests of the Club or to adversely affect the Club's reputation and good standing. I acknowledge that I have an obligation to inform the Board if I am aware or at any time subsequently become aware of any matter which may cause members to have concerns as to my good character.

Signature of applicant _____ Date _____

Applicants require a Proposer and Seconder who are current members of the Club to endorse their application. To be eligible the Proposer and Seconder must:

be a financial Member of Indooroopilly Golf Club;
have been a Member of the Club for more than 12 months;
be over the age of 18; and 4. know the applicant personally and be able to vouch for their good character

TO BE COMPLETED BY THE PROPOSER

Full Name ______ IGC Member Number ______

How long have you known the applicant? _____ Relationship to the applicant _____

I can vouch for the good character of this applicant and acknowledge that I have an obligation to inform the Board if I am aware or at any time subsequently become aware of any matter which may cause members to have concerns as to the good character of the applicant.

Signature _____

TO BE COMPLETED BY THE SECONDER

Full Name ______ IGC Member Number _____

How long have you known the applicant? _____ Relationship to the applicant _____

I can vouch for the good character of this applicant and acknowledge that I have an obligation to inform the Board if I am aware or at any time subsequently become aware of any matter which may cause members to have concerns as to the good character of the applicant.

Signature _____

If you do not know any current Indooroopilly Golf Club Members, please provide either:

1. A letter of introduction from your previous golf club **or 2.** Contact details of a person who has known you for more than two years and is happy to be a referee for your application.

REFEREE DETAILS

Full Name	Contact Number
How long have you known the referee?	Email
Interviewed by	Date
Signature	

Send your completed application form to membership@igcgolf.com.au