



PO Box 61
 Denmark WA 6333
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 Telephone: (08) 9848 1413
 admin@denmarkcountryclub.com.au
 www.denmarkcountryclub.com.au

Dear Committee

I wish to make application for membership to the Denmark Country Club Inc.
 Should my application be approved, I declare that I will abide by the rules and regulations of the Denmark Country Club.
Please find attached my nomination fee of \$40.00 (Junior exempt)

Surname: **Title:**

Given Names: **Gender:**

Street Address:

Postal Address:

Telephone: **Mobile:** **Home:**

Occupation:

Email Address:@.....

Date of Birth:/...../.....

Previous Club: **GolfLink No:**

(if applicable) (if applicable)

Previous Australian Handicap (or overseas equivalent): N/A

PLEASE TICK TYPE OF MEMBERSHIP REQUIRED: Duel Tennis & Golf Permitted

GOLF MEMBERSHIP TENNIS MEMBERSHIP

COUNTRY TENNIS *(for a valid Country Tennis membership, member shall live over a 75km radius from the club)*

COUNTRY GOLF .. *Please tick this box if you would like Denmark Country Club to be your Golfink home club.*
(for a valid Country Golf membership, A Country Member shall live over a 40 kilometres radius from the Club and have membership of another club that includes golf affiliation and handicapping as part of membership of that club)

JUNIOR MEMBERSHIP Golf Tennis SOCIAL MEMBERSHIP

Applicant's signature: **Date:**...../...../.....

We hereby nominate the abovementioned applicant as a member of the Denmark Country Club Inc and believe they are, in every respect, eligible, according to the rules, and fit for membership:

Proposed by: Signature:

Seconded by: Signature:

