

## **Membership Renewal Form**

FULL NAME:

| First Name            | Surname |        | Male/Female |
|-----------------------|---------|--------|-------------|
| D.O.B//<br>ADDRESS:   | EMAIL   |        |             |
| House No. Street Name |         | Suburb | Post Code   |
| TELEPHONE : H         | W       | M      |             |
| OCCUPATION:           |         |        |             |

## **MEMBERS AGREEMENT**

On signing this document I understand that I have no propriety interest in Windaroo Lakes Golf Club or any of its real property. I acknowledge that I will comply at all times with the code of conduct, conditions of membership and the rules of Windaroo Lakes Golf Club as amended from time to time. I agree to any images/photos being used for promotional purposes through social media outlets. I understand that bookings are subject to availability.

SIGNATURE:\_\_\_\_\_

\_DATE:\_\_\_\_

By providing my email address, I authorise you to forward regular emails,

including newsletters and future membership renewal notices

Office use only.... staple receipt to slip

| Membership No | CAT | Paid <u>\$</u> |
|---------------|-----|----------------|
| Rec No        |     |                |