



# BALLAN GOLF CLUB INCORPORATED

Ph: 03 5368 1522 (Clubhouse)

Address: P.O. Box 90  
BALLAN 3342

## PROPOSAL FOR MEMBERSHIP

I hereby make application for membership on the Ballan Golf Club Incorporated as a FULL, LADY, STUDENT, WORKING JUNIOR, JUNIOR or COUNTRY member.

NAME: .....

ADDRESS: .....

..... PHONE: .....

If a junior, date of birth: ...../...../.....

Are you a member of another club? YES/NO

If so, CLUB: ..... HANDICAP: .....

I hereby declare that the following information provided is correct and I agree to abide by the rules and bylaws of the Ballan Golf Club Incorporated.

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

Name of proposer: ..... Signature: .....

Name of seconder: ..... Signature: .....

Received by Secretary: ...../...../..... Nomination Fee - no fee required

Date paid: ...../...../.....

Date presented to committee: ...../...../.....

Application ACCEPTED/DENIED

PRESIDENT: ..... Signature: .....