



CLIFTON GOLF CLUB
QUEENSLAND, AUSTRALIA

APPLICATION for MEMBERSHIP 2020

First Name:..... Surname:.....

Member: Male, Female, Junior (under 18) (Circle one)

Juniors to supply DATE OF BIRTH:

Address:
.....

Telephone: Mobile:

E-mail:

Golf Link Number: (if applicable)

Nominated by:..... Signature:.....

Nominated by:..... Signature:.....

(Two nominees must be financial members of Clifton Golf Club Inc.)

Date: Signature of Applicant:.....

Nomination Fee: \$ 30.00

Annual Membership: Ordinary \$ 210.00

Junior \$ 70.00

Life Membership \$ 3000.00

CGC membership period: January 1 to December 31.

Pro-rata membership is available from May 1.

Please send the completed form including the relevant fees to:

The Secretary
Clifton Golf Club Inc,
P.O. Box 30, Clifton Qld. 4361.