

Summer Membership Application

Surname:		_ Gender:	
First Name:	M	Middle Initial:	
Address:			
		Post Code:	
Phone :	Mobile:		
email:		Date of Birth:	
Previous Golf Club ID Nu	mber (if known)		
	er Membership of the Inglev s of membership as detailed	vood Golf Club Inc for the summer season and I agree on this form	
Signed:		Date:/	
Proposer's Name:		Signed:	
Seconder's Name:		Signed:	

Subscription Rate for Summer Golf Season: \$150

Conditions of Membership

- 1. Membership valid on receipt of payment
- 2. Full playing rights for the four months from 1^{st} October of current year to 31^{st} January of the following year.
- 3. Member will be provided membership card, bag tag and club programme booklet
- 4. The Club rules, a copy of which may be viewed in the clubhouse or on our website and a summary of which appears in the club programme booklet, must be adhered to at all times.
- 5. To be eligible for Club Competitions you must have or obtain a current NZ Golf Handicap

Privacy Statement

We'll only use the personal information provided to us for the purposes related to your golf membership, which includes, supply of your information to the NZ Golf Association and Taranaki Golf Association for Levy purposes, contacting you in regard to arranging matches, references to you in the club minutes and sending you club newsletters via email.

The minutes of the club meetings are available on request and you may unsubscribe from our email newsletter at any time.

Payment

Payment may be made by direct credit into the club's account **(A/C no. 15-3946-0199843-02)** or paid by cash, cheque or EFTPOS at the clubhouse to the duty Bar Manager.

The applicant may use the Club's facilities without payment of green fees until such time as he or she is accepted as a summer member.