



## Membership Application

MINIMUM JOINING AGE: 55 YEARS

Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

First Name \_\_\_\_\_

Common Name \_\_\_\_\_ (name appearing on badge)

Postal Address \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Occupation \_\_\_\_\_

Currently a Member of \_\_\_\_\_ Golf Club \_\_\_\_\_

Club ID No. \_\_\_\_\_ Player ID No. \_\_\_\_\_

Include with application:  
\$20 Entry Fee (incl Name Badge)  
\$25 Annual Subscription  
\$45.00 Total Cost  
Make cheques payable to  
**Auckland Senior Golfers  
Society**

Date \_\_\_\_\_

Signature \_\_\_\_\_

Proposer \_\_\_\_\_

Seconder \_\_\_\_\_

- Please return to Secretary / Treasurer **Graham Arnold**
  - **173 Norman Lesser Drive**
  - **St Johns Auckland 1072**
  - **Phone/Fax 528-8717**
  - **admin@akseniorgolf.org.nz**

Banking Details : **DIRECT BANK PAYMENT ONLY** 03 0179 0156653 00

PLEASE SHOW YOUR NAME AS A REFERENCE SO WE KNOW WHO THE PAYMENT IS FROM.

FOR NEWS, EVENTS, RESULTS and A LOT MORE VISIT OUR WEBSITE REGULARLY

**<http://www.akseniorgolf.org.nz/>**