



PLETTENBERG BAY COUNTRY CLUB

20.05.09

Tel : (044) 533-2132
Fax : (044) 533-0035

P.O. Box 92
Plettenberg Bay
6600 South Africa

MEMBERSHIP APPLICATION FORM

We, the undersigned, hereby nominate for FULL / JNR MEMBERSHIP : GOLF / BOWLS / TENNIS / SOCIAL

Surname : _____ First Names : _____
(Who is personally known to us)

Known as: _____ Profession: _____

DOB / ID Number: _____ Marital Status: _____

Permanent Address : _____

Plett Address (If not same) : _____

Postal Address (For correspondence) : _____

Tel No : Home : _____ Work : _____

Cell : _____ Other : _____

Email: _____

Home Golf Club or other club membership : _____ Mem No. _____

If you have more than one membership, where do you want to be handicapped : _____

I hereby apply for membership of the Plettenberg Bay Country Club, and if elected, I agree to abide by the rules of the Club as set out in the Constitution and as amended from time to time.

Signature of Applicant : _____ Date : _____

This application must be proposed and seconded by FULL MEMBERS of no less than 2 year's standing

PROPOSED BY : _____ SECONDED BY : _____

SIGNATURE : _____ SIGNATURE : _____

Two Full members of the Club to whom the applicant is known and who are not the Proposer or Seconder

1. _____ 2. _____

In the event that the application is not approved by the committee the club will refund total monies paid.

Paid: R _____ pro rata: _____

Date: _____ receipt #: _____

Mgr Sign: _____ Date: _____

Scheduled Main Committee Mtg: _____

Approved Date: _____

TYPE OF MEMBERSHIP - FEES PAYABLE				
	GOLF	BOWLS	TENNIS	SOCIAL
FULL	R2720	R825	R825	R435
JNR	R650	N/A	R320	N/A
COUNTRY	CLOSED			
AFF	R165	R212	R170/R80	N/A
NGN	R100	N/A	N/A	N/A
ENTRANCE				

fees per annum / valid until 30 June 2010