Pink Lake Country Club

Trading as Pink Lake Golf, Nicholson Drive ESPERANCE WA 6450 Postal Address: PO Box 823 ESPERANCE WA 6450

Web: www.pinklakegolf.org.au Email: pinklakegolf@westnet.com.au

TO THE COMMI	<u>ltee</u>				
I would like to becom In the event of my ele	e an ction I agree to	be bound by t	he Club's rules a	membe and by-laws.	er of the club.
-	_	·		•	
Date:					
First Name:		Surname:			_Sex: M/F
Postal Address:					
				Postcode:	
Residential Address:					
				Postcode:	
Occupation:			Email:		
Date of Birth:	(only if aged under 21 years)				
Telephone:	(H)		(W)		
If you have a Current	Live Handicap,	please compl	ete the following	: :	
Current Handicap (ex	act if known) : _	fron	n Golf Club:		
Nominate your home	Club (if not to be I	Pink Lake Golf C	lub)		
Golf Link Card Number	er:				
Applicant's Signatur	e:				
We hereby wish to not that the nominee/s is					
Proposer's Name:			_ Signature:		

Secretary Use Only - Letter of acceptance sent ______ Membership Number _____ Records Updated ____