



P. O. BOX / POSBUS 123
 WHITE RIVER / WITRIVER 1240
 TEL/ FAX (013) 751 3781

E-MAILmanager@whiterivercountryclub.co.za

APPLICATION FOR MEMBERSHIP

FIRST NAMES	<input type="text"/>	MEMBERSHIP TYPE	<input type="text"/> Full	<input type="text"/> Family	<input type="text"/> Veteran		
SURNAME	<input type="text"/>		<input type="text"/> Country	<input type="text"/> Junior	<input type="text"/> Weekly		
NICKNAME	<input type="text"/>		<input type="text"/> Student	<input type="text"/> Under 30	<input type="text"/> Sectional		
INITIALS	<input type="text"/>	TITLE	<input type="text"/>	SECTION	<input type="text"/> Golf	<input type="text"/> Hockey	<input type="text"/> Cricket
ID NUMBER	<input type="text"/>		<input type="text"/>	<input type="text"/> Squash	<input type="text"/> Tennis	<input type="text"/> Social	
BIRTH DATE	<input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D		AGE	<input type="text"/>	GENDER	<input type="text"/> M <input type="text"/> F	
E-MAIL	<input type="text"/>		EMPLOYER	<input type="text"/>			
CLUB NUMBER	<input type="text"/>		OCCUPATION	<input type="text"/>			
Present handicap	<input type="text"/>		NAME OF SPOUSE	<input type="text"/>			
ACTIVE	<input type="text"/> Y <input type="text"/> N	HANDICAPPED	SPOUSE'S ID NO.	<input type="text"/>			
ELECTION DATE	<input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D						
ADDRESS		TELEPHONE NOS.					
BUSINESS	<input type="text"/>	BUSINESS	<input type="text"/>				
POSTAL	<input type="text"/>	CELL	<input type="text"/>				
HOME	<input type="text"/>	HOME	<input type="text"/>				
		FAX	<input type="text"/>				
PROPOSER	No. <input type="text"/>	Name	Signature _____				
SECONDER	No. <input type="text"/>	Name	Signature _____				

Have you been asked to resign , or refused membership of any other club? If so , please state circumstances

Have you been a member of another Club and if so where and when did your membership expire?

Declaration: I..... Hereby wish to apply for membership of White River Country Club and agree to be bound by the Constitution of the Club and abide by the rules and regulations of the Club

SIGNATURE OF APPLICANT DATE

For office use only

FEES PAYABLE	
ENTRANCE	
SUBS PRO RATA	
AFFILIATION	
NGN	

DATE RECEIVED	
NOTICE BOARD	
SECTION COMMITTEE	
MANAGEMENT COMMITTEE	
MEMBERSHIP NO.	