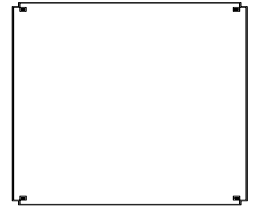


Amount:.....
Receipt:.....
Member no:.....



WELCOME TO STELLENBOSCH GOLF CLUB
Application for membership
1 Aug – 31 Jul

U/30 Membership:	R1950.00	Membership Fee
	R470.00	Affiliation Fee
	R175.00	Handicap Fee

Title: Full Names:

Nickname: Surname:

Birth Date: ID Number: Gender:

Email: Mobile number:

Home Tel: Work Tel: Fax number:

Physical address:

Pos address:

Employer: Occupation:

School/University/College: Grade/Year:

Student number:

Any other family member whom is already a member at Stellenbosch Golf Club:

If "yes" What is the relation:

Herewith I apply for membership at Stellenbosch Golf Club and I undertake that I will obey the constitution of Stellenbosch Golf Club.

Signature:..... Date Applied:.....