

## **MOUNT MACEDON GOLF CLUB INC.**

MT. MACEDON ROAD. Mt. MACEDON ABN. 71 030 431 908 Clubhouse Telephone: (03) 5426 1650 Web: www.mtmacedongolfclub.com.au PRESIDENT: MATT WILLIS CAPTAIN: MICK DOYLE HON. SECRETARY: TONY LITTMAN

HON. TREASURER: BRIAN COLLINS

## SOCIAL MEMBERSHIP **<u>APPLICATION</u>** FORM

## Please ensure all details are provided as this will avoid any delay in processing the application. Please address all correspondence to :

Hon. Treasurer, Mount Macedon Golf Club, PO Box 2, Mt Macedon, Vic, 3441

Mr. /Mrs. /Ms. (Please Circle)				EIDCT		
(Please Circle)	SURNAME: FIRST NAME:					
POSTAL ADDRESS:						
CITY/TOWN:				POST CODE:		
TELEPHONE:		MOBILE:				
EMAIL:						
OCCUPATION:		DATE OF BIRTH:// (Reqd. for Insurance.)				
I/ we wish to APPLY for Social Membership of Mount Macedon Golf Club Inc.						
(For additional Social Memberships please complete the attached form.)						
MT. MACEDON GOLF CLUB SOCIAL MEMBERSHIP \$155.00 per year						
1. MMGC SOCIAL members are eligible to play all year round.						
2. MMGC SOCIAL MEMBERS are NOT eligible to play in weekly or open competition tournaments.						
3. A handicap will NOT be kept for these members.						
4. Social Membership is only available to previous full members of the MMGC.						
5. Social Membership is only available to those over the age of 65.						
*** ALL MEMBERSHIP FEES QUOTED INCLUDE GST***						
PRORATA WILL BE APPLIED ACCORDINGLY TO THE ABOVE FEES						
I / we agree to abide by the Rules & Regulations of the Mount Macedon Golf Club Inc. (Applicants must be proposed and seconded by a financial member of Mount Macedon Golf Club).						
SIGNED:				DATE:///		
PROPOSED By:(BLOCK LETTERS)						
There is a substantial strategy signature:				URE		
SECONDED By:						
Are you or have you been a member of any other Golf Club? YES / NO (Please Circle)						
If Yes please list the name/s of the club/s, and your current handicap and Golf Link Number at that golf club.						
GOLF CLUB:						
OFFICE USE ONLY APPROVED BY MMGC C'tee://			М	MEMBERSHIP FEES DUE: 31/07/2023		
DATE RECEIVED:// AMOUNT RECEIVED: \$			RE	RECEIPT NUMBER:		
MEMBERSHIP TAG & RECEIPT SENT: / /				MEMBERSHIP TAG NUMBER		