



UMHLALI COUNTRY CLUB

P O Box 45 Umhlali 4390 1 Compensation Road, Ballito
 Phone 032 9471181 Fax 032-9471913 admin@umhliclub.co.za

APPLICATION FORM FOR MEMBERSHIP

Personal Details of Applicant

Surname: _____ Title: Mr / Mrs / Miss/ Ms / Dr / Rev
 First Names: _____
 Postal Address _____
 _____ Code
 Telephone Home: _____ Cell _____ Business No: _____
 Email _____
 ID Number _____ D.O.B if no ID: _____
 Occupation _____
 Name of Employer _____

Members of the club to whom the applicant is known: 1 _____ 2 _____

Sport Details

Please indicate the section you wish to be affiliated to. These fees will be charged at a rate prescribed by the respective sporting unions.

Tennis	Bowls	Squash	Golf		
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Do you require a handicap for golf? Yes No

Category of membership required: _____

History of Club Affiliations

Current Club: _____
 Previous Club: _____

S.A. Bowl No if applicable: _____

Have you ever been in default, declined or withdrawn during ballot from any other club? NO YES

DETAILS OF SPOUSE AND CHILDREN TO BE ADDED TO FAMILY MEMBERSHIP

First Names	ID Number	Contact No	Relationship	Member No.

I hereby agree to abide by the terms and conditons of the Constitution of the Umhlali Country Club

Name of Applicant: _____ Signature _____ Date _____
 Name of Proposer _____ Signature _____ Date _____
 Name of Seconder _____ Signature _____ Date _____
 Sports Committee _____ Signature _____ Date _____
 Executive Committee _____ Signature _____ Date _____

FORMS WILL NOT BE ACCEPTED WITHOUT PROPOSER & SECONDER SIGNATURES

*** FULL PAYMENT MUST ACCOMPANY THIS FORM IN ORDER FOR THE APPLICATION TO BE PROCESSED**

* I hereby submit my application for membership at Umhlali Country Club and agree to abide by the Club Constitution and Rules & Regulations, which may be amended from time to time.

* I hereby declare that I have furnished the correct information to Umhlali Country Club and acknowledge that the personal information supplied under this application will be used by Umhlali Country Club to conduct business. I further acknowledge that I bear the onus of notifying Umhlali Country Club in writing of any changes to my or my family's personal information supplied.

* Country members must hold full membership at another Club & participate in the same sport indicated on the application

* I am aware that my application will be displayed on the Club Notice Board for the members before being approved. I acknowledge that the Umhlali Country Club EXCO may object my application despite me being given temporary membership pending the approval thereof. In the event of my application being denied I will be refunded in full.

* All membership category changes will only be effected in January

* Please note that any personal information submitted to Umhlali Country Club will be collected, processed and stored as is necessary to carry out actions for the conclusion or performance of the agreement entered into between parties in accordance with the Protection of Personal Information Act.

*** ALL RESIGNATIONS TO BE IN WRITING AND SUBMITTED BEFORE THE END OF THE YEAR.**

OFFICE USE ONLY

SPORT CATEGORY	ENTRANCE	SECTION	AFFILIATION	SUBSCRIPTION	
Payment	Date		Method		

BANKING DETAILS: Umhlali Country Club, FNB, Account No: 53732429014, Branch & Code: Stanger / 220129