

Verdelho Drive, The Vines Western Australia, 6069 Tel: (08) 9297 0701 Fax: (08) 9297 0729

Email: membership@vines.com.au

## MEMBERSHIP APPLICATION

I hereby make an application for Membership at The Vines Golf & Country Club and provide the following information in support of this application:

Membership Category:			
MEMBER DE	TAILS:		
Full Name	(Given N	lames)	(Surname)
Date of Birth (Day/Mo	onth/Year):	<i>I I</i>	
Private Address:			
Suburb:			Post code:
Postal Address if diff	erent:		
Telephone:	(Home)		(Mobile)
Email:			
amended from time t and any other fees ra	o time, of the Vine ised by the Club.		d by the Constitution and Rules, as may be lemand pay the nomination fees, annual fees
(Signature)			(Date)
Office use only:			
Membership Number	Ē	Amount Paid:	Date: