

Treasurer  
Taihape Golf Club  
P.O.Box 85  
Taihape 4742

**TAIHAPE GOLF CLUB (INC) NOMINATION FORM**

Name.....

Address.....

.....

.....

Email .....

PHONE - home: .....

- mobile: .....

Membership:

*Please tick one*

<input type="checkbox"/>	FULL
<input type="checkbox"/>	LIMITED
<input type="checkbox"/>	MARRIED FULL / LIMITED
<input type="checkbox"/>	JUNIOR (DOB) ____ / ____ / ____
<input type="checkbox"/>	MID WEEK
<input type="checkbox"/>	COUNTRY / OUTSIDE DISTRICT
<input type="checkbox"/>	SUMMER / 9 HOLE
<input type="checkbox"/>	SOCIAL NON PLAYING

Handicap ..... Previous Club ..... ID Number \_\_\_\_ \_

I Hereby agree to accept nomination as a member of the Taihape Golf Club (Inc) and abide by the Rules thereof.

Candidate's Signature ..... Date \_\_\_\_/\_\_\_\_/\_\_\_\_

You are welcome to pay your subscription via internet banking, or simply post a cheque in with the NOMINATION FORM. If you intend to pay by internet banking, please make sure you place your name in the appropriate details box during processing the payment, otherwise you may be billed twice! We will then register you as a member of Taihape Golf Club and advise you of your new NZ Golf ID number. Taihape Golf Club's (Inc) subscription a/c is 03 1525 0006979 00