



APPLICATION FOR MEMBERSHIP

Surname: First Names: Title:

Date of Birth: / / I.D. Number:

Occupation: Name of Employer:

Postal Address: Postal Code:

Physical Address: Postal Code:

Are you a Bosch Hoek Estate Homeowner? Yes No (✓)

Telephone Number: (H) (W) Cell

Email Address: Current Handicap:

To which golf clubs do you or have you belonged.....

Have you ever been denied entrance to another club or been a member in default at any other club? Yes No (✓)

Will Bosch Hoek Golf Club be your affiliated club? Yes No (✓)

Invoicing Details if different from above:

Name:

Postal Address:..... VAT No.:

I hereby declare that I have furnished the correct information and acknowledge that the information supplied in this application will be used by Bosch Hoek Golf Club to conduct business. I further acknowledge that I bear the onus of notifying Bosch Hoek Golf Club in writing of any changes to my personal information supplied. I hereby submit my application for membership at Bosch Hoek Golf Club and agree to abide by the Club Constitution and Rules & Regulations, which may be amended from time to time.

I declare that the above information is true and correct.

Signature of Applicant: Date:

Name of Club Proposer: Date:

Signature of Club Proposer:

Length of time Applicant is known to Proposer:

"As good as it gets..."

Director: IAJ Clark

Postal Address: PO Box 1 Balgowan 3275

Physical Address: Bosch Hoek Golf & Country Estate, Balgowan, 3275

Telephone No. 033 234 4232

Email: golf@boschhoek.co.za Website: www.boschhoek.co.za

Bosch Hoek Golf (Pty) Ltd - Co. No. 2008/019056/07



Banking Details: Bosch Hoek Golf (Pty) Ltd, Nedbank Ltd, Gateway 189 905, Account No. 189 905 1333. **Please use your full name as reference.**

Additional Information Required for a **Family Membership only:**

Full Name of Spouse: I.D. Number:
Affiliation: Yes No (✓)

Full Name of Child 1: I.D. Number:
Affiliation: Yes No (✓)

Full Name of Child 2: I.D. Number:
Affiliation: Yes No (✓)

Full Name of Child 3: I.D. Number:
Affiliation: Yes No (✓)

I am aware that for my application to be considered by the committee, I will have to pay the required fee for the contract period in advance.

I am aware that my application will be displayed on the Notice Board for the members of Bosch Hoek Golf Club to review. I acknowledge that the committee may reject my application despite my being permitted to play golf on the course pending the approval of my application. In the event of my application being denied I will be refunded in full.

I acknowledge that Bosch Hoek Golf Club is in no way responsible for any injury sustained by me or my family, when using the Club's facilities and indemnify Bosch Hoek Golf Club in respect of such claims where Bosch Hoek Golf Club has not been reckless or grossly negligent.

Please note that any personal information submitted to Bosch Hoek Golf 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 the parties in accordance with the Protection of Personal Information Act.

NAME:..... **DATE**

SIGNATURE:

Membership **approved / declined** by the Executive Committee.

Date:

Signature of Chairman:

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