Riverside Golf Club
26 Lochside Drive • WEST LAKES SA 5021
P (08) 8268 3850 • **F** (08) 8268 5451

Membership Application

I hereby apply for: (Please tick one)

Junior Under 18 ☐ Junior Under 21 ☐ Junior Under 18 6 Month Introductory ☐
Provisional Under 15 ☐ Provisional Under 18 ☐ Provisional Under 21 ☐

In the event of my election, I agree to be bound by the Constitution and Policies of Riverside Golf Club.

Mr/Mrs/Miss/Ms_____ _____
(Surname- Block Letters) (Christian Names – Block Letters)

Address_____

Suburb_____ Post Code_____

E-mail _____

Phone_____ Mobile_____

Date of Birth_____ Occupation/Year Level_____

Employers/Schools Name_____

Guardian/Secondary Contact (Must be over 18)_____

Phone_____ Mobile_____

How did you find out about RGC?_____

Past or Present Membership of other Golf Clubs_____

GolfLink No (If applicable)_____ Handicap_____

Do you intend to nominate Riverside as your home club? Y( ) N( )

Signature of Applicant or Guardian_____ Date_____

The Proposer & Seconder must be full members of the Club with voting rights.
The above applicant is known personally to us and would be suitable for election as a Member of the Riverside Golf Club Inc.

Proposer_____ Signature_____ Member No_____

Seconder_____ Signature_____ Member No_____

On receipt of this form, duly completed and signed, your name will be listed on the Club notice board for at least 14 days prior to being considered by the Membership Committee.

Office Use Only

Date Received_____ Date due off notice board_____

File Created Y( ) N( ) Payment Made Y( ) N( ) Amount$_____ Member No_____