



Your Details:

Surname: _____ Given names: _____ Title: _____

Postal address: _____

Suburb: _____ Post code: _____

*Phone B/H: _____ A/H : _____

*Please leave blank if you do not wish your phone number(s) to be available to other members.

Date of Birth: _____

If you are a member of another affiliated golf club please state:

Your GolfLink number: _____

Name of club: _____

Current exact handicap: _____

Desired home club for handicapping purposes: _____

Membership category - Please tick:

12 Month Membership

Full Ordinary Member

- Aged 21 to 59 years

Junior Member

- Aged under 18 years

Senior / Discounted Member

- Aged 60 years+ or 18-20 years

6 Month Membership

Full Ordinary Member

- Aged 21 to 59 years

Junior Member

- Aged under 18 years

Senior / Discounted Member

- Aged 60 years+ or 18-20 years

Payment Method

Please contact the Club House if Family Membership discounts apply before submitting payment.

Cheques -

All cheques to be payable to Village Links Pty. Ltd.

Credit Card Payments –

Visa & MasterCard Only

Eftpos facilities available

I agree to abide by the rules of the Village Links Golf Club Inc.

SIGNED**DATED**

Please lodge at the clubhouse, fax to (07)5547 0855 or post to: Village Links, 55 Swanborough Rd, Logan Village, 4207.

OFFICE USE ONLY	Date Received : _____	Membership number F / S / J _____
	Receipt number : _____	GolfLink number : _____
	Additional family members : _____	