



### 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: \_\_\_\_\_ Required for discounted memberships

*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 –

Eftpos, Visa &amp; MasterCard 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<br>USE<br>ONLY | Date Received : _____             | Membership number F / S / J _____ |
|                       | Receipt number : _____            | GolfLink number : _____           |
|                       | Additional family members : _____ |                                   |