



Toowoomba Golf Club Ltd

Nomination Form

235 – 323 Rowbotham Street Middle Ridge
Phone: 4635 1219
ACN: 009 783 162

Type of Membership **Social Membership** *(Payment of \$10 must accompany nomination form)*

Candidate's Name.....

OccupationBirth Date:

Private AddressPhone

Mobile No.Email Address (please print)

Name & Title of Employer

Business AddressPhone

Have you been a member of Toowoomba Golf Club previously? YES / NO Approx Year

Has candidate ever been rejected for membership of any other Golf Club?YES/NO

Name and address of three References:

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Signature of CandidateDate

Proposer

Proposer must be Ordinary member

(Print Name)

(Signature)

Secunder

Secunder must be Ordinary member

(Print Name)

(Signature)

Office use:

Receipt No:DateMembership No.....Pin No.