

# Tarras Golf Club

## Membership Application

Membership No.	394
Processed	
Payment	
Email	
Card Sent	

Name \_\_\_\_\_ male/female (please circle)

Street \_\_\_\_\_

Suburb \_\_\_\_\_

Town \_\_\_\_\_

Postcode \_\_\_\_\_

Phone Home \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

Handicap Index (if you have one) \_\_\_\_\_

If you are also a member of another club, what is your 7 digit ID number and the name of your home club?

\_\_\_\_\_

If you have been a member of a club in the past please supply details including past membership ID numbers.

\_\_\_\_\_

Membership is for one year (April to April), \$150 (no pro rata membership offered).

Cheque made out to "Tarras Golf Club", or direct credit to  
Tarras Golf Club, Bank of New Zealand, Cromwell  
02-0920-0017673-000  
(please include your full name on our statement to identify payment).

Return your application and cheque to  
Tarras Golf Club, The Secretary, RD 3, Cromwell, 9383 or email to  
tarrasgolfclub@gmail.com