



SOCIAL MEMBERSHIP

Social Membership

One year \$22.00

Three years \$55.00

Membership period 1 February—31 January

For those who enjoy entertainment and the social scene. Benefits include: entry to members Cash Badge draws; members pricing on beverage, food, movie tickets, shows and events; automatic inclusion in YARRAREWARDS program, swipe kiosk promotions and \$15 in points when you swipe on your birthday. Earn and redeem points through accommodation, catering, bar, gaming and pro shop merchandise.

Personal Details: * Required

Title: Mr/Mrs/Ms/Miss

*Full Name: _____

*Residential Address: _____ State: _____ Post Code: _____

*Postal Address: (if different to above) _____

*Email: _____

*Telephone (AH): _____ (BH): _____

*Telephone (MOB): _____ *Date of Birth (for annual birthday promotion): ____/____/____

I **DO NOT** wish to receive the ClubNewsletter and promotional material I **DO NOT** wish to receive poker machine promotional material

Application:

To the Board of Directors, Yarrowonga Mulwala Golf Club Resort:

I, _____, of _____ desire to

become a Social member of the Yarrowonga Mulwala Golf Club Resort and request you enter my name on the register of members accordingly. I agree to be bound by your constitution and by-laws made thereunder. I understand the membership entitlements and restrictions of my chosen membership type. I hereby certify that the information provided is true and correct. I understand I will become a temporary member of the Club until the membership applications has been approved by the Board of Directors at the next monthly board meeting. Subscriptions are renewable from the 1st February each year and must be paid by the last day of February, otherwise re-nomination may be necessary. There are no pro rata subscription rates.

Signature: _____ Date: ____/____/____

Payment Options:

You can pay for your membership by cash, money order, cheque or credit card.

Visa Mastercard

Card Number

Expiry Date: ____/____/____ Amount: \$ _____

Full Name on Card: _____ Signature: _____

Office Use Only:

Date paid: ____/____/____ Amount Paid: _____ ID Type: _____ Rect. No: _____

Membership No: _____ Membership card photo taken: _____ Board Approval date: ____/____/____