



UMHLALI COUNTRY CLUB

P O Box 45 Umhlali 4390
 Phone 032 9471181/2/3/4 Fax 032-9471913

marketing@umhaliclub.co.za

APPLICATION FOR MEMBERSHIP

Jan-12

Personal Details of Applicant

Surname: _____ Title: Mr / Mrs / Miss/ Ms / Dr / Rev
 Christian Names: _____
 Postal Address _____
 _____ Code _____
 Telephone Home: _____ Cell _____ Business No: _____
 Email _____
 ID Number _____ D.O.B if no ID: _____
 Occupation _____
 Name of Employer _____

Members of the club to whom the applicant is known: 1 _____ 2 _____

Sport Details

Please indicate the section you wish to be affiliated to. These fees will be charged at a rate prescribed by the respective sporting unions.

Tennis	Bowls	Squash	Golf		
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Do you require a handicap for golf? Yes No

Category of membership required: _____
History of Club Affiliations _____
 Current Club: _____
 Previous Club: _____
 S.A. Bowl No if applicable: _____

Have you ever been in default, declined or withdrawn during ballot from any other club? NO YES

DETAILS OF SPOUSE AND CHILDREN TO BE ADDED TO FAMILY MEMBERSHIP

Christian Names	ID Number	Contact No	Relationship	Member No.

I hereby agree to abide by the terms and conditons of the Constitution of the Umhlali Country Club

Name of Applicant: _____	Signature _____	Date _____
Name of Proposer _____	Signature _____	Date _____
Name of Seconder _____	Signature _____	Date _____
Sports Committee _____	Signature _____	Date _____
Executive Committee _____	Signature _____	Date _____

FORMS WILL NOT BE ACCEPTED WITHOUT PROPOSER & SECONDER SIGNATURES

NOTE:Applicants for Country Membership must hold a full membership at another club and participate in the same sport as indicated on this application. Country Members may only be handicapped at this club by special arrangement.

FULL PAYMENT MUST ACCOMPANY THIS FORM IN ORDER FOR THE APPLICATION TO BE PROCESSED

Please ensure that this application has been proposed and seconded by 2 members before submitting to the club

Applicants names will be displayed on the club notice board before being approved.

A temporary is granted until such time as the application is approved by the UCC Executive Committee

ALL RESIGNATIONS TO BE IN WRITING AND SUBMITTED BEFORE THE END OF THE YEAR.

OFFICE USE ONLY

Payment Date: _____

NAME	SUBSCRIPTION	SECTION	AFFILIATION	ENTRANCE	SPORT