



PO Box 124, Pennington, 4184

Tel: (039) 975 1615 Admin / (039) 975 1320 Proshop

MEMBERSHIP APPLICATION

SURNAME:			
FIRST NAME:			
ID NUMBER:			
E-MAIL:			
TELEPHONE:	Cell:	Home:	Work:

DO YOU WISH TO BE HANDICAPPED AT UMDONI? YES: _____ NO: _____

PROPOSER		SIGNATURE	
SECONDER		SIGNATURE	
COMMITTEE MEMBER		SIGNATURE	

AGREEMENT

I / WE HEREBY:

- Apply for:
Full ____ Lady____ Senior____ Family____ Junior____ Country____ Social____;
- Agree that upon acceptance of this application I / we shall be bound by the terms & conditions of the constitution, regulations, dress & etiquette codes, bye-laws & rules of golf as well as regulations of the Umdoni Park Trust;
- Acknowledge that the Umdoni Park (Pty) Ltd, Club or Trust is in no way responsible for any injury sustained by me / us or my / our family, when using the facilities and indemnify the entities in respect of any such claims;
- Agree that should I / we resign from the Club or my / our membership be terminated in terms of the constitution of the Club, then any outstanding balance at the date of such resignation or termination will fall due by me / us immediately upon cessation of membership;
- Acknowledge that subscriptions due from the date of acceptance as a member, are payable immediately on receipt of notification of the amount due; and
- Acknowledge that annual subscriptions are due and payable on 1 March annually. Should I / we wish to resign, this must be submitted in writing before or on 28 February, failing to resign before 2 March will result in me / us being liable for levies and affiliations paid on my / our behalf for the year ending 1 March.

SIGNATURE

DATE