

# GOLF MEMBERSHIP RENEWAL 2019/20



Mr / Mrs / Ms / Miss

Magpies M/Ship No. \_\_\_\_\_ First Name \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_ Postcode \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (M) \_\_\_\_\_

Email \_\_\_\_\_

Please Tick Category Below:

CATEGORY		Fortnightly Direct Debit		Pensioner	Fortnightly Direct Debit	
Full Adult (7 days)	\$1090	\$46.42		\$1045	\$44.69	
6 Day Adult (Sun-Fri)	\$935	\$40.46		\$875	\$38.15	
Weekday 18 Hole (Mon-Fri)	\$790	\$34.89		\$735	\$32.77	
Weekday 9 Hole (Mon-Fri)	\$620	\$28.35				
Student 18 - 22 Years	\$400					
Junior Under 18 Years (7 Days)	\$170					

Junior/Age Pensioners I.D. \_\_\_\_\_

TOTAL PAID \$ \_\_\_\_\_

**NO REFUNDS WILL BE GIVEN, UNLESS EXCEPTIONAL CIRCUMSTANCES**

**DIRECT DEBIT FEE** - \$4.50 per fortnight. Please complete the reverse side to use the Direct Debit facility.

**Credit card is NOT available for Direct debit**

Method of Payment (tick one)

Cash  EFTPOS  Cheque  Credit Card  \*Mastercard and Visa only

**Credit Card Details** (circle one) MasterCard Visa Expiry date: \_\_\_\_ / \_\_\_\_

Card holder's name \_\_\_\_\_ Card number \_\_\_\_\_

CCV number \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

\*Do you have a Golfink membership? Yes/No Membership No: \_\_\_\_\_

\*If you are applying for golf membership and are a member of a Golf/Country Club, please indicate the name of the club: Club \_\_\_\_\_

\*Do you wish Magpies Belconnen Golf Club to be your Home Club for handicapping purposes? Yes/No

\*Current Handicap: \_\_\_\_ (evidence attached) Previous Handicap: \_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I agree to be bound by the Objects of Association and By-Laws of the Club.

Signature \_\_\_\_\_

**Magpies Belconnen Golf Club**

Stockdill Drive Holt

PH: Golf Club: 6254 2922 Pro Shop: 6254 6740



# DIRECT DEBIT REQUEST

## Request and Authority to debit the account named below to pay (BELCONNEN MAGPIES SPORTS CLUB)

<b>Request and Authority to debit</b>	Surname or company name: _____ Given names or ACN /ARBN: _____ (“you”)  I authorise Belconnen Magpies Sports Club (Debit user Identification Number 181729) to arrange for my Golf Membership to be debited through the Bulk Electronic Clearing System from the nominated account below subject to the terms and conditions of the Direct Debit Request Service agreement (and any other further instructions provided below).
<b>Insert the name and address of financial institution at which account is held</b>	Financial Institution Name: _____  Address: _____ _____
<b>Insert details of account to be debited (Only savings or Cheque accounts)</b>	Name of account: (e.g. M Smith) _____  BSB Number: _____  Account Number: _____
<b>Acknowledgement</b>	By signing this direct debit request, I acknowledge having read and understood the terms and conditions governing the debit arrangements between you and Belconnen Magpies Sports club, as set out in this direct debit request and Direct Debit Request Service Agreement. To cancel direct debit it must put in writing.
<b>Payment details</b>	Direct debits will be made fortnightly, Direct debit memberships will roll over at the new fee schedule each membership year unless cancelled in writing.
<b>By signing and inserting your address you are agreeing to a 12 month contract</b>	Signature: _____ Address: _____ _____  Date: ____ / ____ / ____