



**NATIONAL ASSOCIATION OF LEFT-HANDED
GOLFERS OF AUSTRALIA
A.C.T DIVISION INCORPORATED**

2009 NATIONAL
CHAMPIONSHIP
SECRETARY
Julie Farrell
Tel: 02 6242-7969
E-mail:
sidandjulie@netspeed.com.au

LIFE MEMBER
Kevin Bourke

PO Box 698
Dickson ACT 2602

PRESIDENT
Barry Huckstepp
CAPTAIN
Jim Smith
SECRETARY
Sid Farrell
Tel: 02 6242-7969

APPLICATION FOR MEMBERSHIP

I,
(full name of applicant)

Address Post Code

Tele: Home. Business Mobile

Email:

Hereby apply to become a member of the abovementioned incorporated association. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

I am a financial member of Golf Club
(home club)

My current A.G.U. Handicap is and my Golf Link Number is

The sum of \$ 20.00 is the current joining/membership fee.

MAKE CHEQUES PAYABLE TO:- NALGA ACT DIVISION
MAIL ENTRIES TO:- David Thorne
PO Box 698
DICKSON ACT 260
Contact; David Thorne 02-6242 9194
mail@nalg-act.org.au
<http://www.nalg-act.org.au/>

Payment can be paid by: Cheque or transferring funds via your net-banking using your Phone number as Reference to **BSB 112-908**
Account **491 180 631** Name: NALGA ACT DIVISION

.....
Signature Date

I being a financial member of the association nominate the applicant, who is personally known to me, for membership of the association.

.....
Name (please print) Signature Date

ACT NALG Membership Number:
Cash/Cheque Receipt Number Date