



APPLICATION FOR MEMBERSHIP

Payment Plan: Cash/EFT _____ Debit/Order _____
Membership Type: _____
Date Applied: _____
Membership effective from: _____

Name: _____ Title _____

Surname: _____

Identity number _____ Nationality _____

(If you are a Foreigner, please supply your Date of Birth and Passport no)

Postal Address: _____

Residential Address: _____

Telephone: (home) _____ (work) _____

Cell: _____

Email address: _____

Language Preference: _____ Marital Status _____

Employer: _____ Occupation _____

If you belong to more than one golf course, where do you want to be handicapped? _____

Name of Previous Club of which you were a member: _____

Please supply "Letter of Good Standing" from previous club **if not currently active on handicap system.**

Current Handicap: _____

Proposer's Name & Tel Number: _____

Would you like to take Driving Range Membership? _____

(Only R2080 per annum for CCC Members incl 15% VAT. No monthly payments allowed. Pro rata basis. Pay upfront)

AGREEMENT

If elected to membership, I hereby subscribe to and agree fully to abide by the rules and regulation in terms of the Centurion Country Club. **Should I resign my membership** of the club, I accept that membership fees paid to the end of the financial year are **not refundable**. In addition, I undertake to advise management **in writing** of such resignation by the end of the financial year. If paying by debit order, I am liable for the full year's debit order deductions. (Resignations submitted after the end of February will be accepted but full membership fees are payable for that year)

Date: _____

Signature: _____

Where did you hear about CCC? _____

(Applicant/Guardian)

Carmia van Wyk Tel: (012) 665-9601 or Email: membership@centurioncountryclub.co.za
