

# CLUBLINKS

**CLUBLINKS ADDITIONAL CARD REQUESTS**  
**(PLEASE FILL OUT ONE FORM PER CARD REQUEST AND RETURN TO ADDRESS BELOW)**

<b>ClubLINKS Cardholder's Name:</b>	<b>ClubLINKS Cardholder's Contact No.</b>	<b>ClubLINKS Cardholder's Card Number:</b>
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**Home Club:** Sanctuary Lakes / Sandhurst (please circle)

**PLEASE ATTACH A COPY OF EITHER A DRIVING LICENCE, PASSPORT, STUDENT ID, DOCUMENT FROM CURRENT EMPLOYER TO VALIDATE THAT THE ADDITIONAL CARDHOLDER (IF AGED OVER 18 YEARS) LIVES AT THE PRIMARY RESIDENTIAL OWNER'S ADDRESS**

**Name of Additional Cardholder:**

Title:	
First Name:	
Second Name:	
Surname:	
Date of Birth:	
Mailing Address:	
Home Phone No.	Mobile No.
Email address	

**Is this the first additional ClubLINKS Card you have requested?**

**YES:** There is no need to complete this section

**NO:** A \$25.00 Additional Card Application Fee applies. Please complete the section below with your credit card details or return a cheque/money order with this form.

**Payment Options:** Credit Card / Cheque / Money Order (please circle)

Cardholder Name:	
Card number:	
Expiry Date:	
Card type:	Visa / Mastercard / Bankcard / Amex (please circle)
Cardholder name:	
Expiry Date:	Cardholder Signature:

**Amount:** \$25.00

**Receipt:** Yes / No (please circle)

I acknowledge that the information provided on this form is true, complete and correct.

**Signed** ..... **Date** ...../...../.....

**Name:**