



JUNIOR GOLF PROGRAM APPLICATION

All sections of the application form must be completed to avoid delays in processing.
Applications to be forwarded to the Golf Professional.

APPLICANT DETAILS

First Name:			
Surname:			
Address			
		Postcode:	
Sex: please tick	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Date of Birth:		Contact Phone:	
Email Address:			
Emergency Contact -	Name:		
Phone:1		Phone: 2	
Relationship to Applicant			
Medical History:			
Signature of Applicant:			

PARENT DETAILS (if applicant under 18 years)

Sandhurst Club Member Number:			
First Name:			
Surname:			
Address			
		Postcode:	
Contact Phone:			
Email Address:			
Signature of Parent:			

SANDHURST MEMBER DETAILS (IF DIFFERENT FROM PARENT)

First Name:			
Surname:			
Address			
		Postcode:	
Contact Phone:			
Email Address:			
Signature:			

OFFICE USE ONLY

<i>Date rec'd</i>		<i>Approved Date</i>	
<i>Jnr ID #</i>		<i>Etiquette</i>	
<i>Dress Rules</i>		<i>Skills (golf)</i>	
<i>Entered into Powergolf</i>		<i>Supervised Course Access Only</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO

S:\Community Relations\Membership Approvals\Junior Golf\JUNIOR APPLICATION.doc

Sandhurst Club Limited

Proudly Managed By PGA LINKS Management Pty Ltd ACN: 099 690 301

Phone: 03 8787-7011 Fax: 03 8787-7033