



THE WESTERN AUSTRALIAN GOLF ASSOCIATION (INC)

Suite 1/5, 49 Melville Parade, South Perth WA 6151

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CLUB INFORMATION SHEET / MEMBERSHIP DECLARATION

1. Club Name:	_____		
Golf Link Number:	_____		
Club Category:	"A" Club _____		
District Name:	Metropolitan _____		
Street Address:	_____		
	_____	Post Code:	_____
Postal Address:	_____		
	_____	Post Code:	_____
Club Phone Number:	1. _____	2. _____	
Fax Number:	_____		
Email Address:	_____		
Website Address:	_____		
Name of Course:	_____	_____	_____
Number of Holes:	_____	_____	_____
Length (metres):	_____	_____	_____
Par:	_____	_____	_____
ACR:	_____	_____	_____
Course Record:	_____	Date Achieved:	_____ Score: _____
Club Champion:	_____		
Note: Name of course eg. championship, members, midweek, course one, course two etc. (refer to the men's courses only).			
Date of Annual General Meeting:	_____	Centenary Year:	_____
Course Architect:	Original:	_____	
Course Architect:	Current:	_____	

2. Club Secretariat:	<input type="checkbox"/> General Manager	<input type="checkbox"/> Manager	<input type="checkbox"/> Managing Secretary
	<input type="checkbox"/> Secretary Manager	<input type="checkbox"/> Secretary	Other: _____
Name:	_____		
	<i>Title</i>	<i>Christian Name</i>	<i>Surname</i>

Professional:	<u>Mr / Mrs / Ms / Miss</u>		
	<i>Title</i>	<i>Christian Name</i>	<i>Surname</i>
Pro Shop Number:	_____		
Fax Number:	_____		
Email Address:	_____		
Course Superintendent:	_____		
	<i>Title</i>	<i>Christian Name</i>	<i>Surname</i>
Telephone:	_____	Fax:	_____
Email Address:	_____		

3. President:	_____		
	<i>Title</i>	<i>Christian Name</i>	<i>Surname</i>
Address:	_____		Post Code: _____
Telephone:	_____	Fax:	_____
Email Address:	_____		
Captain:	_____		
	<i>Title</i>	<i>Christian Name</i>	<i>Surname</i>
Address:	_____		Post Code: _____
Telephone:	_____	Fax:	_____
Email Address:	_____		
	President's Club:	<input type="checkbox"/>	Captain's Club: <input type="checkbox"/>
Club Delegate (1):	_____		
	<i>Title</i>	<i>Christian Name</i>	<i>Surname</i>
Address:	_____		Post Code: _____
Telephone:	_____	Fax:	_____
Email Address:	_____		
Club Delegate (2):	_____		
	<i>Title</i>	<i>Christian Name</i>	<i>Surname</i>
Address:	_____		Post Code: _____
Telephone:	_____	Fax:	_____
Email Address:	_____		

4. Major Events:

<i>Name of Event</i>	<i>Dates</i>	<i>No. of Holes</i>	<i>Type</i>	<i>Eligibility</i>
eg. Club Open Day	Sunday July 15 2006	36	Par	Open : invitation : closed
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5. **Number of Staff:** *Full Time* *Part Time* *Total*

Administration:	_____	_____	_____
Course:	_____	_____	_____
House:	_____	_____	_____
TOTAL:	_____	_____	_____

6. **Reciprocal Clubs:**

Queensland:	_____
_____	_____
New South Wales:	_____
_____	_____
South Australia:	_____
_____	_____
Tasmania:	_____
_____	_____
Victoria:	_____
_____	_____
International:	_____
_____	_____
_____	_____

7. Smoke Free Areas:	Bar Area	<input type="checkbox"/>	Lounge	<input type="checkbox"/>	Dining Room	<input type="checkbox"/>
	Kitchen	<input type="checkbox"/>	Office	<input type="checkbox"/>	Pro Shop	<input type="checkbox"/>
	Change Rooms	<input type="checkbox"/>	Committee Rooms	<input type="checkbox"/>	Common Areas	<input type="checkbox"/>

8. Membership Declaration:

I declare that as at January 1, 2007 the total male playing membership of the _____
Golf Club is as follows –

- | | | |
|-------------------------------|----------------------|-------|
| 1. Under 12 | <input type="text"/> | |
| 2. 12 – 14 Years | _____ | |
| 3. 15 – 17 Years | _____ | |
| 4. TOTAL (2 + 3) | | _____ |
| 5. 18 – 21 Years | _____ | |
| 6. 22 – 30 Years | _____ | |
| 7. 31 – 50 Years | _____ | |
| 8. 51 – 70 Years | _____ | |
| 9. Over 70 Years | _____ | |
| 10. TOTAL (5 to 9) | | _____ |
| OVERALL TOTAL (4 + 10) | | _____ |

Signed: _____

Name: _____ Position Held: _____