WELCOME TO THE *TITLE: *FIRST NA *EMAIL:

MEMBERSHIP FORM

waitalianclub.com 9328 4104 reception@waitalianclub.com

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*TITLE:	*FIRST	NAME:	*SURNAME:			
*EMAIL:			*PHONE:			
*TICK APPLICA	BLE:	New member Renewing member	ership			
The se	ection belo	ow is only applicable if you're a new	member or updati	ing your details.		
*ADDRESS:						
*SUBURB:			*POSTCODE:	POSTCODE:		
OCCUPATION:			*DOB:	OOB:		
COMPANY (IF A	PPLICABL	.E):				
Membe	rshi	p category (Tick all	that apply)			
		NOMINATION FEE - \$35.00	11.37			
FAMILY		Cost: \$270 For families (2 adults, 2 children under 18) with Australian Citizenship or Residency				
SINGLE		Cost: \$240 For individuals with Australian Citizenship or Residency				
PENSION FAMILY		Cost: \$105 For family of 2 pension card holders	PENSION CARD NUMBER: pension card holders			
SINGLE PENSION		Cost: \$90 PENSION CARD NUMBER: For individual pension card holders				
уоитн		Cost: \$110 For individuals 18 to 29 y/o				
VISA HOLDER		Cost: \$110 For individuals with a temporary visa				
SOCIAL		Cost: \$110 For individuals who only want to participate in club social activities (see page 2)				
OVER 85		Cost: \$35 For individuals over the age of 85				
	Section o	nly applicable if selecting family or p	ension family me	mbership		
PARTNER	TITLE:	FIRST NAME:				
	SURNA	ME:		DOB:		
CHILDREN	FULL N	IAME:		DOB:		
	FULL N	IAME:		DOB:		
	FULL N	IAME:		DOB:		
	FULL N	IAME:		DOB:		

MEMBERSHIP NUMBER:



		B MEMBERSHIP \$230		
IUNDERSTA	s are required to pay an additional in the walge MAY SHARE MY OFFICIAL CLUB SPONSORS	& provide the following information: SHIRT SIZE: Men: 2XL, 3XL, 5XL		
Please place a cross in the box if you don't want your email shared		Women: 8-22		
Are you a membe	er of another golf club? (please	provide details below)		
OTHER GOLF CLU	В:	GOLF LINK NUMBER:		
Paymen	t			
TOTAL AMOUN	NT PAYABLE: \$	Total of membership categ & Golf Club membership fe		
APPLICATIONS WIL DETAILS ARE PROV	L NOT BE PROCESSED UNLESS IDED BELOW.	MONIES ARE TRANSFERRED	OR CREDIT CARD	
BANK TRANSFER:	BSB: 016-464 ACC: 28791841 (Reference: Please quote invoice		ne for new application)	
CREDIT CARD:	MasterCard Visa			
CARD NUMBER:				
NAME ON CARD:				
EXPIRY:		CVV:	/V:	
	rs are required to pay a one-off no payable annually and valid for 12 r			
joining mid-term 4. Each October yo applicable mem 5. It is a requireme WA Italian Club I Golf Link registra 6. All non financial 7. By completing the or on the premis newsletters, and 8. *Proposer and so	members will not be permitted to his membership form, you agree to ses in its communications and pub- d printed materials. econder must be financial member DE BY THE WA ITALIAN CLUB IN	your membership. All members late. If Club (WAIGC) that all member e that additional WAIGC fees income the facilities and services that the Club may use photos of olications, including but not limers of the WA Italian Club Inc.	s are required to pay the s are members of the clude mandatory annual of the WA Italian Club Inc. you taken at Club events ited to social media, emai	
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