

Application for (Member & Junior) **Membership of the West Aviat Golf Club (Inc).**

For more information see [www.westaviat.com](http://www.westaviat.com)

**(PLEASE PRINT IN BLOCK LETTERS)**

.....  
(Title) (First Name) (Middle In) (Surname) (Preferred Name)

Address: .....  
Number Street Town / Suburb State Post Code

Postal Address: .....

( ) ..... (.....)  
Preferred Phone No Email Address

**Occupation:** .....

Date of Birth: .....

I undertake to pay my membership fees when due **and abide by the Dress Standards, Rules and Constitution of the Club.** I understand that my Membership will not commence until I have paid the current years subscription.

\*Playing Member Nomination fee \$ 50 and Membership fee \$..... = \$.....  
Playing Member \$100  
Junior 12 to 17yr \$20

**\*For Electronic Funds Transfer:** Please Contact the Secretary at [membership@westaviat.com](mailto:membership@westaviat.com)  
for Bank Details

**My previous membership was at: -**

.....  
Club Current (Yes/No) Golflink No Handicap

Is West Aviat to be your Home Club? .....

I declare that I have not been refused membership at any other golf club

.....  
Signature of Applicant Date  
(If under 18, Signature of parent or Guardian)

**ACCEPTANCE OF THIS APPLICATION IS CONDITIONAL UPON BEING ENDORSED BY THE COMMITTEE.**

The **West Aviat Golf Club (Inc)** is affiliated to the Golf WA and Golf Australia. All new members without a current handicap must complete 3 cards from games with West Aviat G.C., attested by a West Aviat Club member with a Golflink Handicap.