



Best Overall Experience

**KRUGERSDORP GOLF CLUB**  
1 Nightingale Crescent,  
Rant-en-Dal, Mogale City  
Office (011) 660 4365  
Admin Office Email:  
Receptionist: alicia@kdpgc.co.za  
Secretary: beatrix@kdpgc.co.za

## APPLICATION FOR MEMBERSHIP

OFFICE USE ONLY				
MEMBERSHIP NUMBER	CREATE ACCOUNT	GOLF ROUNDS	TAGS	MEMBER PRODUCT
	CLUB SPENDING			SUBS OTHER
SAGA LOADING	PLAYER ID	CARD ORDER NUMBER		INVOICE

**I HEREBY APPLY FOR MEMBERSHIP AT KRUGERSDORP GOLF CLUB  
AND ON ACCEPTANCE WILL ABIDE BY THE CLUB'S CONSTITUTION AND RULES**

CATEGORY OF MEMBERSHIP APPLIED FOR:

NAME

SURNAME

NICKNAME

ID NUMBER

DATE OF BIRTH

GENDER


POSTAL ADDRESS


CELL NUMBER

HOME NUMBER

ALTERNATIVE NUMBER

*(Compulsory for Under 18)*

E-MAIL ADDRESS

*(Compulsory for all Members)*

CLUB WHERE APPLICANT IS/WAS A MEMBER


STANDARD BANK KEY WEST

ACCOUNT NUMBER- 021 351 821

BRANCH NUMBER- 01 58 41

REFERENCE- NAME AND SURNAME

PAYMENT OPTION	FULL	SPLIT	DEBIT ORDER
AMOUNT PAID	R		

**PLEASE SEE THE ATTACHED SCHEDULE FOR INFORMATION *iro* THE PAYMENT OPTIONS**

SIGNATURE OF APPLICANT

SIGNATURE OF GUARDIAN *(For Under 18)*

DATE MEMBER JOINED *(Compulsory)*


**PLEASE NOTE THAT THIS IS AN ONGOING MEMBERSHIP AND SHOULD YOU WISH TO  
CANCEL YOUR MEMBERSHIP IT SHOULD BE DONE IN WRITING BEFORE  
31st JANUARY EACH YEAR**

STAFF SIGNATURE

--