



**CARTERTON GOLF CLUB**

*Wairarapa, New Zealand. Est.1911*

**CARTERTON GOLF CLUB Inc**  
***Membership Form***

**Name**.....

**Preferred Name**.....

**Address**.....

**Date Of Birth** (if under 30 yrs of age) .....

**Phone No's**.....

**Email Address**.....

**Class of membership applied for**.....

If you are currently a member of another golf club or have been a member, please provide the following information

Previous Club..... NZGA number.....

**DECLARATION:**

I hereby apply for membership of the Carterton Golf Club in the membership category shown above. I acknowledge and agree to pay all subscriptions levied, by the due date. I agree to abide by the rules of the Carterton Golf Club as published and amended from time to time.

**Date**.....

**Applicants Signature**.....

**Nominated by (name)** .....

**Signature**.....

**Seconded by (name)**.....

**Signature**.....