



## CLUB APPLICATION

Mr / Mrs / Mr / Miss / Other: \_\_\_\_\_

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_ Birthdate: / /

Home Address: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

As above

Mail Address: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

### Emergency Contact

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Relationship: \_\_\_\_\_

## MEMBERSHIP & DECLARATION

Membership Type

1 Year (\$5.00)  
Social Membership

3 Year (\$10.00)  
Social Membership

Memberships are valid for the financial year. (1 July - 30 June)  
I declare that all information given is true to the best of my knowledge.  
I am 18 years of age or over & wish to become a Social Member of  
Everglades Country Club Limited & request that you enter my name on the  
Register of Members accordingly. I agree to be bound by the Constitution  
of Everglades Country Club & to abide by all the Club policies, rules &  
regulations administered by the club. I understand that membership is not  
transferable & the fee, and of part thereof is not refundable.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



## PREFERENCES

### Entertainment

- |   |  |
|---|--|
| <input type="checkbox"/> Live shows & concerts    | <input type="checkbox"/> Dinner shows        |
| <input type="checkbox"/> Melbourne Cup day events | <input type="checkbox"/> Kids shows & events |
| <input type="checkbox"/> Free entertainment       | <input type="checkbox"/> UFC & main events   |

### Dining

- |  |   |
|--|---|
| <input type="checkbox"/> Private functions | <input type="checkbox"/> Cafe & coffee shop |
| <input type="checkbox"/> Wine appreciation | <input type="checkbox"/> Specials           |
| <input type="checkbox"/> Degustations      | <input type="checkbox"/> Kids menu & deals  |

### Sporting

- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> Golf comps  | <input type="checkbox"/> Coaching       |
| <input type="checkbox"/> Bowls comps | <input type="checkbox"/> Social golf    |
| <input type="checkbox"/> Pro-Am      | <input type="checkbox"/> Barefoot bowls |

## PRIVACY ACT

Under privacy legislation, members that do not wish to receive information from the Club may do so except in the event that this contravenes the law. Your professional information will be securely stored on the Everglades Country Club database & will not be disclosed to any third parties without your consent.

Please remove me from the Club's mailing list, other than for essential notices. By ticking this box you are declaring that you do not wish to receive any general information, promotional, or marketing material by email, mail, SMS or any other form of contact (including Club Talk magazine, birthday mail, etc)

Please post me a copy of The Annual Report. By ticking this box you are confirming you want a posted copy of The Annual Report. The Annual Report is also available in the Club and on the Club's website.

## OFFICE USE ONLY

Date: \_\_\_\_\_ Fee: \_\_\_\_\_ Receipt#: \_\_\_\_\_  
Memb Number: \_\_\_\_\_ ID Type: \_\_\_\_\_  
Entered by: \_\_\_\_\_ ID Sighted by: \_\_\_\_\_

### Proposers

Proposer Name: \_\_\_\_\_ Proposer Memb#: \_\_\_\_\_  
Proposer Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Proposer Name: \_\_\_\_\_ Proposer Memb#: \_\_\_\_\_  
Proposer Signature: \_\_\_\_\_ Date: \_\_\_\_\_