



## Proserpine Junior Golf Membership Form 2016

### Childs Details

Name:..... Male / Female

Address:.....

.....

DOB:...../...../..... Current Age:.....

### Contact Details

Parent / Guardian Name:.....

Relationship to child:.....

Phone: (H)..... (M)..... (W).....

Email:.....

2<sup>nd</sup> Contact Name:.....

Relationship to child:.....

Phone: (H)..... (M)..... (W).....

Email:.....

### Medical Details

Known Medical Condition:.....

Known Allergies:.....

Current Medication:.....

Family Doctor:.....

### Membership Details

Please tick which age group membership is applicable

- Under 8..... \$Nil
- 8-11 Years ..... \$60
- 12-16 Years ..... \$80
- Full 18 Hole Junior ..... \$185

Please indicate if another junior member, as there may be a family membership available.

Proserpine Golf Club Inc Bank Details: BSB 034 207 Acc 000054

Signed Parent/Guardian.....Date.....

Membership No:

Date Paid:

Amount Pd:

Payment Method:



Consent to use photographs in the Media

At the Proserpine Golf Club we like to make the public and other members of the club aware of the progress our juniors are making at a club level and in competitions that we attend while encouraging more people to come along.

To make this possible we ask your permission to use your child's name and photo to possibly appear in the local newspapers and the club newsletter and on the clubs website.

Consent

I give my consent to the Proserpine Golf Club to copy images of my child without the acknowledgement of myself or my child and without my entitlement to any remuneration of compensation.

I acknowledge that the images are the property of the Proserpine Golf Club and that they will only be used to promote the club and its programs and my child's achievements.

I hereby agree that my child's name and photo may be used as described above.

Child's Name:.....

Parent / Guardians name:.....

Signature:.....

Date:.....