



All correspondence to:  
The Secretary Manager  
Golf Links Road  
BUDERIM QLD 4556

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## SOCIAL MEMBERSHIP NOMINATION

**Social Membership Preference:**  1 membership year\* \$10  3 membership years\* \$20

\*All social memberships are valid from 1 October - 30 September irrespective to the joining date

**Name:** Dr / Mr / Mrs / Miss / Ms \_\_\_\_\_  
(Surname) (Given Name)

**Address:** Unit/Street Number: \_\_\_\_\_ Street: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

**Postal Address:**  As Above

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

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

**Mobile Number:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

How would you prefer to receive your Subscription Notice, and other important correspondence from Headland Golf Club?  Email  Post

How did you hear about us? \_\_\_\_\_

Reason for joining: \_\_\_\_\_

**Application Declaration:** I hereby make an application for social membership of Headland Golf Club and agree to abide by all Clubs policies and legal requirement and agree to adhere to any directive given by Club Management or its representatives. I declare that I am over the age of 18 and that the information contained in this application is true and correct.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Office Use Only**

MEMBERSHIP #: \_\_\_\_\_

DATE PAID: \_\_\_\_\_

SUBS: \$ \_\_\_\_\_