

VETERAN GOLFERS

PO Box 6010 Tweed Heads South 2486

MEMBERSHIP APPLICATION.

l,	
Of	
	Phone:
	Veteran Golfers' and declare that I am a Golfing
Signature:	Date:
CTH Badge No:	Date of Birth:
Proposed by:	Badge No:
Seconded by:	Badge No:
Shirt size: S M L	XL XXLXXXL
Preferred Name to be embroidered on Shirt	
\$50 must accompany this application.	
Received by:	
Shirt Issued:	