



2020/21 Golf Membership Application

first name: _____ surname: _____ male / female (please circle)

address: _____

suburb/town: _____ postcode: _____

phone (home): _____ mobile: _____

email: _____ date of birth: _____

referring member (if applicable): _____

Golf Link # (if applicable): _____ McCracken preferred as Home Club Yes / No (Please Circle)

Do you consent to having your phone number/s displayed in the members handbook? Yes / No (Please circle)

Golf Membership: 1 March 2020 - 28 February 2021

Please circle category type and payment option (yearly or monthly)

CATEGORY	YEARLY	MONTHLY
7 Day	\$1290	\$125
5½ Day	\$990	\$105
Veteran	\$990	\$105
Junior U12	\$175	N/A
Junior U18	\$275	N/A
Junior U21	\$595	N/A
City Membership	\$450	N/A
Pay for Play	\$390	N/A

I, _____ (name) authorise McCracken Country Club to automatically debit my

VISA / MASTERCARD / DINERS* / AMEX* (circle) for the provisions of Golf Club Membership as specified below:

*Please note DINERS or AMEX cards incur a 1.5% surcharge.

_____ / _____ / _____
 name on card (exactly as printed) card number expiry

_____ / _____ / _____
 cardholder's address postcode

_____ / _____ / _____
 cardholder's signature date

please charge my credit card: IN FULL charge of \$ _____ MONTHLY (on the 15th of each month until February 2021)

for full yearly payments only, you may also prefer to pay by:

CHEQUE please make payable to McCracken Country Club EFT ask us for more information

Please return completed form to McCracken Country Club

McCracken Drive (PO Box 521) Victor Harbor SA 5211 P: 08 8551 0200 F: 08 8551 0280 E: info@mccrackencountryclub.com.au

www.mccrackencountryclub.com.au

For office use only: Date of membership commencement: / /