



Keperra Country Golf Club

Application for Junior Membership

Surname	
Given Name	
Date of Birth	
Male/Female	
Residential Address	
Applicant Signature	

Type of Membership (Please Circle)

Sub-Junior (6-11) or Full Junior (12-17)

Parent/Guardian Details

Surname	
Given Name	
Residential Address	
Home Phone	
Mobile Phone	
Business Phone	
Email	

Golf History – (if applicable)

Previous Golf Club	
Previous Golf Link Number	
Previous Handicap	
Would you like to make KCGC your home club for handicapping?	

Applicable Fees

Annual/Pro Rata Subscription	
------------------------------	--

Payment Options – (circle)

Cash Cheque Credit Card (Visa/Bank/Master Card only)

Amount \$ _____

Credit Card No _____ Expiry Date _____ CCV _____

Signature of Cardholder _____

NB. All Membership Subscriptions are subject to Board Approval