



**MEMBERSHIP APPLICATION FORM (GAUTENG)**

[www.tanglewoodgp.co.za](http://www.tanglewoodgp.co.za)  
[hennie@tyganpress.co.za](mailto:hennie@tyganpress.co.za)

CONTACT DETAILS  
 PO Box 751826  
 Gardenview  
 2047

Cell: 082 945 7347  
 Tel: 011 452 7757  
 Fax: 086 503 3482

NAME & SURNAME		
I.D NUMBER/DATE OF BIRTH		
GENDER		
POSTAL ADDRESS		
POSTAL CODE		
PHYSICAL ADDRESS		
POSTAL CODE		
PHONE - WORK		
PHONE - HOME		
CELL NUMBER		
FAX NUMBER		
E-MAIL ADDRESS		
EMPLOYER		
OCCUPATION		
PREVIOUS CLUBS		
PRESENT HANDICAP (IF APPLCABLE)		
HAVE YOU EVER BEEN EXPELLED FOR ANY CLUB/ORGANIZATION?	YES	NO
HAVE YOU EVER BEEN REQUESTED TO RESIGN?	YES	NO
HAVE YOU EVER HAD AN APPLICATION FOR MEMBERSHIP REJECTED?	YES	NO
<b>MEMBERSHIP FEES</b>		
MEN	R	
LADIES	R	
JUNIORS (18 years & under)		
STUDENTS (full time) (copy of Student Card required)		
ADULT ASSOCIATE MEMBERSHIP		
JUNIOR ASSOCIATE MEMBERSHIP		
<b>FOR OFFICIAL USE ONLY</b>		
DATE OF ACCEPTANCE:		
MEMBERSHIP NO:		
MEMBERSHIP TYPE:		

**I HEREBY AGREE TO ABIDE BY THE RULES AND CONSTITUTION OF TANGLEWOOD GOLF CLUB AND THE AGREEMENT ENTERED INTO BETWEEN GERMISTON GOLF CLUB AND TANGLEWOOD GOLF CLUB, COPIES OF WHICH ARE AVAILABLE FROM OUR OFFICES.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**BANKING DETAILS:**

Tanglewood Golf Club  
 First National Bank  
 Branch Code: 221526 (Kloof)  
 Account No: 62008910392  
 Current cheque account

PLEASE USE YOUR SURNAME AS A REFERENCE WHEN MAKING YOUR DEPOSIT & FAX YOUR APPLICATION FORM & PROOF OF DEPOSIT TO TIBBY BURGER (031) 768 1904

**Affiliated to Central Gauteng Golf Union**