

Stand 3259, Los Angeles Boulevard,
P. O. Box 31254,
Lusaka, 10101, Zambia



Phone: +260-211-251598
+260-211-255129
Cell: +26-0979-447542
Email: lusakagolfclub@gmail.com

LUSAKA GOLF CLUB

APPLICATION FORM FOR MEMBERSHIP

I hereby make application for membership as:

FULL MEMBER PERMIT HOLDER FULL MEMBER
COUNTRY MEMBER STUDENT MEMBER
ABSENTEE MEMBER JUNIOR MEMBER (date of birth.....)

(a) DELETE CLASSES NOT APPLICABLE

(b) USE A SEPARATE APPLICATION FORM FOR EACH INDIVIDUAL

SURNAME NAME..... FIRST NAME.....

P. O. BOX.....

E. MAIL..... CEL/TEL NO.....

SIGNATURE..... DATE.....

BUSINESS OR PROFESSION.....

EMPLOYED BY.....

PROPOSED BY (Block Capitals).....

SIGNATURE.....

SECONDED BY (Block Capitals).....

SIGNATURE.....

PREVIOUS CLUB..... HANDICAP.....

SIGNATURE OF COMMITTEE MEMBER (1).....

SIGNATURE OF COMMITTEE MEMBER (2).....

SIGNATURE OF CHAIRMAN OF COMMITTEE ACCEPTING APPLICATION:

IMPORTANT- PLEASE NOTE

(a) APPLICANTS MUST BE INTRODUCED TO TWO COMMITTEE MEMBERS AND THE COMPLETED FORM SHOULD BE LODGED WITH THE CLUB SECRETARY.
(b) AN APPLICATION WILL NOT BE CONSIDERED UNLESS PAYMENT HAS BEEN MADE TO COVER THE ENTRANCE FEE AND ANNUAL SUBSCRIPTION

PAYABLE NOTES

1. Annual subscriptions are due when application is made for membership and thereafter on the 1st day of July each year.
2. Members selected on or after the 1st day of January in any year are liable for only annual subscriptions for that year.
3. Entrance fees are payable when application is made.
4. When junior student members transfer to student/full membership (whichever is appropriate) an entrance fee is payable, which shall be equal to the difference between that already paid and the current entrance fee.

PRES IDENT: NSAMA MATAKA

HON. SECRETARY: GEORGE ROBERTS

CAPTAIN: KEVIN CUMINGS

TRAUSTEE: CALEB MULENGA

P. D CHISANGA

YOUSUF PATEL