



Completed forms must be brought back to the Horizons Golf Resort Pro Shop or scanned / emailed to [proshop@horizons.com.au](mailto:proshop@horizons.com.au)

2020/21 MEMBERSHIP APPLICATION			
First Name:			
Surname:			
Preferred Name:			
Residential Address:	Suburb:		
	State:	Post Code:	
Postal Address (if different to Residential Address):	Suburb:		
	State:	Post Code:	
Telephone:	( )	Mobile:	
Email Address:			Date of Birth:
Current/Previous Affiliations	Home Club:	Golf Link No:	
Transfer Golf link?	(yes or no)		
1 YEAR MEMBERSHIP CATEGORY – PLEASE CIRCLE ONE			
Membership Type - 1 Year	Annual Fee	Half Yearly Fee	Monthly direct debit
PLATINUM	\$2300 <input type="checkbox"/>	\$1200	\$210 <input type="checkbox"/>
GOLD	\$1350 <input type="checkbox"/>	\$720	\$125 <input type="checkbox"/>
SILVER	\$940	\$500	\$87
BRONZE (Renewal only)	\$840 <input type="checkbox"/>	\$450 <input type="checkbox"/>	\$78 <input type="checkbox"/>
WHITE GOLD	\$500 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$45 <input type="checkbox"/>
COUNTRY	\$450 <input type="checkbox"/>	No fee option available	No fee option available
JUNIOR (under 25 YEARS)	\$350 <input type="checkbox"/>	No fee option available	No fee option available
JUNIOR (UNDER 18 YEARS)	\$100 <input type="checkbox"/>	No fee option available	No fee option available
PAYMENT OPTIONS – PLEASE CHOOSE ONE			
<input type="checkbox"/>	Cash or credit card payments at the Pro Shop. <b>Please note credit card payments will incur a 1.5% surcharge.</b>		
<input type="checkbox"/>	Cheque in favour of Horizons Golf Resort Port Stephens Pty Ltd – to be submitted to the Pro Shop		
<input type="checkbox"/>	Bank Transfer to: Account Name: HGRPS Pty Ltd   BSB: 062 761 A/c Number: 1011 5682   Please use your name as the payment reference.		
<input type="checkbox"/>	*Bank authorised monthly direct debit. <i>Please note that a bank authorisation form will need to be completed. A member of the Pro Shop team will be in touch to arrange this.</i>		
<input type="checkbox"/>	Golf Membership online voucher (this option is only available for membership categories ANNUAL FEE)		
HOW DID YOU HEAR ABOUT MEMBERSHIP AT HORIZONS? CIRCLE YOUR ANSWER			
- Current Member      - Referral      - Newspaper      - Facebook      - Google      - Word of Mouth			
- Horizons Flyer      - Email      - Other:			
If referred; please enter their name or organisation here:			
I acknowledge by signing below, I am applying for a 12 month membership period (or pro rata period if applying part way through the year) and I will be responsible for payment of all fees on a timely basis when due.			
Signature		Date	