



7 PARK DRIVE
PO BOX 7
DARNALL
4480
info@darnallclub.co.za

MEMBERSHIP APPLICATION FORM

PERSONAL DETAILS OF APPLICANT

SURNAME: _____ TITLE: _____
FIRST NAMES: _____
ID NUMBER: _____ DATE OF BIRTH: _____
PHYSICAL ADDRESS : _____ POSTAL ADDRESS: _____

CODE: _____
TEL HOME: _____
CELL: _____
EMAIL ADDRESS _____
OCCUPATION _____
NAME OF EMPLOYER _____

MEMBERSHIP DETAILS

Category of Membership required _____
(please refer to the next page to see which category you require)
Members of the Club to which the applicant is known
1 _____
2 _____

History of club affiliations

Current Club: _____
Previous Club: _____
Have you been in default, declined or withdrawn during ballot from any other club

DETAILS OF SPOUSE AND CHILDREN TO BE ADDED TO FAMILY MEMBERSHIP

First Names	ID number	Relationship	Contact number	Member no.

SPORT DETAILS

Please indicate the section you wish to be affiliated to
(please note applicable affiliation fees will be charged at a rate prescribed by the respective sporting unions)

Tennis		Bowls		Squash	
Swimming		Golf		Do you require a handicap for Golf	

I Herby Submit my application form for membership of the Darnall Country Club and agree to abide by the Club Constitution's Rules and Regulations, which may be amended from time to time
Name of applicant: _____
Sign: _____ Date: _____

Important information

*Kindly direct any membership queries to the Admin Office.

*Country members to supply a utility Bill as proof of residence

*The applicants ID and proof of payment must be supplied.

* I hereby declare that I have given the correct information to the best of my knowledge to the Darnall Country Club and acknowledge that my Personal information and details supplied under this application will be used by the Darnall Country Club to conduct business.

I further acknowledge that I bear the onus of notifying Darnall country Club in Writing of any changes to my or my families personal information supplied.

I am aware that my application will be displayed on the club notice board for the members before being approved. I acknowledge that the Darnall Country Club Exco may object my application despite me being given temporary membership pending approval thereof. in the event of my application being denied I will be refunded in full

* All membership category changes will be done in October each year.

* Applicants agree that the Darnall Country Club will be permitted to use any photographs or videos taken at functions or sporting events for advertising purposes and that such footage may be posted on Darnall Country club website,facebook or instagram pages.

ALL RESIGNATIONS ARE TO BE IN WRITING AND SUBMITTED BEFORE THE END OF AUGUST

Name of Applicant:	_____	Signature _____	Date: _____
Name of Proposer:	_____	Signature _____	Date: _____
Name of Seconder:	_____	Signature _____	Date: _____
Executive Comittee:	_____	Signature _____	Date: _____
Sports committee:	_____	Signature _____	Date: _____

Office use only**Banking Details**

Darnall Country Club

First National Bank

Acc Number: 53730519073

Acc Type: Cheque

Branch Code 220 129

REF: your name

Payment Date: _____

Payment type: _____

Membership Number : _____

Transaction account number:

Membership Category	Cost per Year	Affiliation Fee	Cost per Year
Family	R2,500	Golf	R650
Family Country (>32km)	R1,500	HNA	Courier Charges for CARD
Single	R1,500	Bowls	R400
Single Country (>32km)	R500	Squash League	
Pensioners (2 people)	R1,000	* affiliation fees may change due to unions	
Single Pensioner	R500		
Corporate	R4,010		