CABOOLTURE GOLF CLUB

2027 Membership Application

Applicant Details

_____ _____ _____

Title *First Name* *Last Name*

Date of Birth: _____/_____/_____ Phone: _____ Mobile: _____

Email: _____ Occupation: _____

Home Address: _____ Postcode:_____

Mailing Address: _____ Postcode:_____

Membership Details

Membership Type	Details	Membership fee	Joining fee	Total
Ordinary	Full Member	$1346	$500	**$1846**
5 Day	Monday to Friday	$1010	$500	**$1510**
Intermediate 1	Age 18 - 21	$409		**$409**
Intermediate 2	Age 22 - 24	$592	$500	**$1092**
Country		$588	$500	**$1088**
Junior	Under 18	$101		**$101**
Junior + Handicap	Under 18	$201		**$201**
Social		$5		**$5**

Golf Details

Have you been a member of a Golf Club which has been your designated **HOME CLUB** during the last year Yes / No

Club: _____ Golf ID:_____

Is Caboolture Golf Club to be your new **HOME CLUB** for handicapping purposes? Yes / No

Will you be bringing a motorised buggy onto the course? *(Additional Fees $80.00)* Yes / No

Acknowledgement

I, the undersigned, hereby make application for the above nominated class of Membership and acknowledge that the Board of the Club may, at their sole discretion, refrain from or refuse to elect me to membership without assigning any reason, therefore. If accepted, I undertake to abide by the Rules and By-Laws of the Club. I acknowledge that details of my name, address and handicap may be forwarded to "Golf Australia" to provide Golf Link services.

_____ _____

Applicant's Signature *Date*

Junior Membership Applications Only

As the parent/guardian of the Applicant named above, I acknowledge and accept the conditions relative to Membership of Caboolture Golf Club referred to in this application.

_____ _____ _____

Parent / Guardian Full Name *Signature* *Date*

Office Use Only: _____ Membership Number

☐ MiMembership ☐ Welcome Email ☐ Membership Card ☐ Golf ID

Membership Categories

Ordinary Member

- Eligible to play 7 days per week
- Access to course and practice facilities
- Access to all member competitions
- Access to clubhouse facilities
- Golflink Handicap
- MiScore Subscription - local
- May invite up to 3 guests at any one time to play a social game for reduced rates
- Has full voting rights and is eligible to hold office

5 Day Membership – Monday to Friday

- Eligible to play Monday to Friday
- Access to course and practice facilities
- Access to member competitions held Monday to Friday (including Public Holidays)
- Access to clubhouse facilities
- Golflink Handicap
- MiScore Subscription - local
- May invite up to 3 guests at any one time to play a social game for reduced rates
- No voting rights and is ineligible to hold office

Intermediate 1 (18 and 21 years of age) & Intermediate 2 Membership (22 and 24 years of age)

- Access to course and practice facilities
- Access to all member competitions
- Golflink Handicap
- Access to clubhouse facilities
- No voting rights and is ineligible to hold office.

Country Member

- Reside more than 150 km from Club
- Access to member competitions excluding Club Championships and Honour Board Events
- Maximum of 12 competition days per year
- Access to clubhouse and practice facilities
- Golflink Handicap
- No voting rights and ineligible to hold office

Junior Membership

- A person under the age of 18 years (without a handicap)
- Access to course and practice facilities
- Access to clubhouse facilities
- No voting rights and is ineligible to hold office.

Junior Membership with Handicap

- A person under 18 years of age (with AGU Handicap)
- Access to course and practice facilities
- Access to all member competitions
- Golflink Handicap
- Access to clubhouse facilities
- No voting rights and is ineligible to hold office

Social Member

- Access to clubhouse facilities
- Ability to accumulate house points to redeem in clubhouse
- No voting rights and is ineligible to hold office.

CABOOLTURE GOLF CLUB

2027 Direct Debit Application

1. Your payment will be automatically taken from your nominated payment method via payrix. The following details will be sent to payrix.
2. Direct Debit can be set up for Monthly, Quarterly and Bi-Annually plans.
3. Please make sure you read the direct debit service agreement on the following page.
4. Please make sure you have given an email address as all communication regarding your payment plan will be sent via email.
5. Payments are made on the 7th or the next business day and can take up to three (3) business days depending on your financial institution.

2027 Direct Debit Options / Fees

Membership Type	Payment Frequency	Initial Payment	Joining Fee	Total Initial Payment	Ongoing Payments
Ordinary Membership	Monthly	$213.84	$500	**$713.84**	**$113.84**
	Quarterly*	$421.50	$500	**$921.50**	**$321.50**
	Bi-Annual*	$733	$500	**$1233**	**$633**
5 Day Membership	Monthly	$185.84	$500	**$685.84**	**$85.84**
	Quarterly*	$337.50	$500	**$837.50**	**$237.50**
	Bi-Annual*	$565	$500	**$1065**	**$465**

New Members: Total initial payment needs to be paid in full to the Pro Shop before we can activate membership.

**Quarterly Payment Plans are only available to join in October, January & April.*
**Bi-Annual Plans are only available to join in October.*

Your Details

Name: _____ Member: _____

Payment Plan Option: _____ Start Date: _____

I / we request to pay via the Payrix Direct Debit System $_____ as my initial payment and $_____ per the nominated plan thereafter from my/our account or credit card as nominated below, for payment of membership fees until all fees are paid for the current golfing year.

Payment Details

BSB: _____ Account No: _____

Account Name: _____

Financial Institution: _____ Branch: _____

We can only accept bank account details that are in the sole name of the account holder or from a joint bank account including the name of the account holder.

Your Agreement

I/We acknowledge that this direct debit arrangement is governed by the terms of the direct debit request service agreement overleaf. I/We agree to the fees listed above. I/We have read the numbered points above and understand. If the nominated bank account is a joint account, both account holder's signatures are required.

Account Holder

Name: _____

Signature: _____

Date: _____

Joint Account Holder

Name: _____

Signature: _____

Date: _____

Payrix DDR Service Agreement - Terms and Conditions

This Agreement is designed to explain what your obligations are when undertaking a Direct Debit arrangement with Payrix Australia and the Business. It also details what our obligations are to you as your Direct Debit Provider. We recommend you keep this agreement in a safe place for future reference. It forms part of the terms and conditions of your Direct Debit Request (DDR) and should be read in conjunction with your DDR form.

I/We hereby authorize Payrix Australia Pty Ltd (ABN: 63 135 196 397) Direct Debit User ID 382220 to make periodic debits on behalf of the "Business" as indicated on the front of this Direct Debit Request (herein referred to as the Business).

I/We acknowledge that Payrix Australia is acting as a Direct Debit Agent for the Business and that Payrix Australia does not provide any goods or services and has no express or implied liability in regards to the goods and services provided by the Business or the terms and conditions of any agreement with the Business.

I/We acknowledge that Payrix Australia and the Business will keep any information (including account details) contained in the Direct Debit Request confidential. Payrix Australia and the Business will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction, or disclosure of that information .

We will only disclose information that we have about you:

(a) to the extent specifically required by law; or

(b) (b) for the purposes of this agreement (including disclosing information in connection with any query or claim).

I/We acknowledge that the debit amount will be debited from my/our account according to the Direct Debit Request, this Agreement and the terms and conditions of the agreement with the Business.

I/We acknowledge that bank account details have been verified against a recent bank statement to ensure accuracy of the details provided. If uncertain you should contact your financial institution.

I/We acknowledge that is my/our responsibility to ensure that there is sufficient cleared funds in the nominated account by the due date to enable the direct debit to be honoured on the debit date. Direct debits normally occur overnight; however, transactions can take up to three (3) business days depending on your financial institution.

I/We acknowledge and agree that sufficient funds will remain in the nominated account until the direct debit amount has been debited from the account and that if there are insufficient funds available, I/We agree that Payrix Australia will not be held responsible for any fees and charges that may be charged by your financial institution.

I/We Acknowledge that there may be a delay in processing if:

1) There is a public or bank holiday on the day, or any day after the debit date

2) A payment request is received by Payrix Australia on a day that is not a Banking Business Day

3) A payment request is received after normal operational hours, being 2.30pm Monday to Friday. Any payments that fall due on any of the above will be processed on the next business day.

I/We authorise the Business to vary the amount of the payments from time to time as provided for within the Business agreement. I/We authorise Payrix Australia to vary the amount of the payments upon instructions from the Business.

I/We do not require Payrix Australia to notify me/us of such variations to the debit amount.

I/We acknowledge that the total amount billed will be for the specified period for this and/or subsequent agreements and/or amendments.

I/We acknowledge that the Business is to provide 14 days' notice if proposing to vary the terms of the debit arrangements.

I/We acknowledge that variations to the debit arrangement will be directed to the Business.

I/We acknowledge that any request to stop or cancel the debit arrangement will be directed to the Business.

I/We acknowledge that any disputed debit payments will be directed to the Business. If no resolution is forthcoming, you are advised to contact your financial institution. I/We acknowledge that if a debit is returned by my/our financial institution as unpaid,

I/We will be responsible for any fees and charges for each unsuccessful debit in addition to any financial institution charges and collection fees, including and not limited to any solicitor fees and collection agent fees appointed by Payrix Australia.

I/We authorise Payrix Australia to attempt to re-process any unsuccessful payments as advised by the Business.

I/We acknowledge that if specified by the Business, a setup, variation, dishonour, SMS or processing fees may apply as instructed by the Business.

I/We authorise:

1) The Debit User to verify details of my/our account with my/our financial institution

2) The Financial Institution to release information allowing the Debit User to verify my/our account details. Payrix Australia Pty Ltd