

*Welcome to  
Noosa Golf Club....*

*...a great social atmosphere for all  
occasions...*

*...afternoon drinks on the deck...*

*...meeting friends for lunch...*

*...an enjoyable meal...*

*...mingle with the social festivities  
and raffles of a Friday evening...*

*...or just relax...*



**Contact Details**

PO Box 56  
Tewantin 4565

Phone 07 5447 1407  
Fax 07 5449 0107

Email [admin@noosagolf.com.au](mailto:admin@noosagolf.com.au)  
Web – [www.noosagolf.com.au](http://www.noosagolf.com.au)

**Trading Hours**

Clubhouse open from 10.00am  
daily

**Restaurant Trading Hours**

Lunch - Daily

Dinner - Tuesday, Wednesday,  
Thursday & Friday

Restaurant - Bar

Deck - Poker Machines & keno

Functions can be catered for  
Please contact Administration  
for further enquiries



**NON-PLAYING MEMBERSHIP  
(Social)**

**APPLICATION FORM**

**Joining Fee \$11.00**

# Non-Playing Member

## Entitlements

- Sign in guests to the Club
- Non-Playing Members included in Member draws
- Discounted food and drinks

Utilise facilities;

- o Bar
- o Restaurant
- o Poker Machines

Please note - Proof of Membership may be required. Please ensure you carry your Membership Card.

## Application Process

*To apply for Non-Playing Membership simply fill out this application form, and submit with the accompanying payment (\$11 yearly) to Administration during Business Hours, or to the Bar. At this stage you will be issued with a receipt. Please show this receipt until such time as you receive your Membership card.*

## NON-PLAYING MEMBER APPLICATION

Please have identification ready when applying.

TITLE: MR/ MS/ MISS/ MRS (please Circle)

NAME

.....  
PLEASE PRINT IN BLOCK LETTERS

DATE OF BIRTH ..... / ..... / .....

HOME ADDRESS

.....  
.....

POSTCODE.....

MAIL ADDRESS  As above (Please tick)

.....

.....P'CODE.....

HOME PHONE.....

MOBILE.....

EMAIL.....

Accounts will be sent via email

I HEREBY APPLY FOR NON-PLAYING MEMBERSHIP AT THE NOOSA GOLF CLUB AND DECLARE THAT THE ABOVE INFORMATION IS CORRECT.

.....  
SIGNATURE OF APPLICANT

.....  
DATE

*Your card will be ready to pick up from the bar within the week*

**Please Note:**  
*Payment must be made with application*

### STAFF USE ONLY

Will collect from bar  
*Printed next working day*

Unable to pick up- Please send in mail  
*May take up to 1 month*

Date Paid.....

Membership Number.....

Entered by (Name).....

Confirmed Identification - mandatory

ID Number.....

Signed.....