

MEMBERSHIP NO :

OR NO :



ASSOCIATE MEMBER

CATEGORY OF MEMBERSHIP	DEPOSIT	ENTRANCE FEE	MONTHLY SUBSCRIPTION
ASSOCIATES MEMBER 1) GOVERNMENT	RM 500 (G) RM500 (NG)	RM 1060 (G) RM 530 (NG)	RM 106(G) RM 53 (NG)
2)PRIVATE • FAMILY	RM 500 (G) RM 500 (NG)	RM 2120 (G) RM 2120 (NG)	RM127.20 (G) RM 53 (NG)
• INDIVIDU	RM 500 (G) RM 500 (NG)	RM1590 (G) RM1590 (NG)	RM127.20 (G) RM 53 (NG)
TERM MEMBER 1) 6 MONTHS 2) 1 YEAR	RM500 (G/NG) RM500 (G/ NG)	RM 1060 RM 2120	- -

* All Price Included SST 6 %

KELAB GOLF &REKREASI PETRONAS, 24300, KERTIH, KEMAMAN, TERENGGANU
TEL : 09-8640232/0259/0544 FAX : 09-8640233
EMAIL : kgrpmarketing@gmail.com

APPLICATION FOR ASSOCIATE MEMBER

PERSONAL PARTICULARS

Affix recent
Photograph
and attach

Golfer : Handicap : Non golfer :

Name
Address
Postcode Email
Nric No. / Pass No Place of Birth
Phone Number Nationality
Date of Birth Date of Marriage
Spouse Name Marital Status Single Married
Spouse Nric Sex Male Female

Name of Children (Below 18/21) *	NRIC No./ Passport No	School/Ins/College/University
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
4) _____	_____	_____
5) _____	_____	_____

EMPLOYMENT

Employer's Name
Staff Number
Address
Postcode Tel. No
Designation

INCOME

Annual Income Below RM 24,000 P.A Above RM 24,000 P.A

Banker's Name
Bankers' Address

I hereby apply to become a member of Kelab Golf & Rekreasi PETRONAS, and if admitted, I agree to abide by the Constitution, Rules and Regulation of the Club. I certify that the above information is true and complete. I fully realize that any comission or falsification of information will be considered sufficient reason for rejection of this application or if admitted for dismissal.

* Dependent children shall remain on the membership of their parent until they are 18 or 21 years old if they enrolled in an educational institution and as long as they are unmarried and are financially dependent.

Signature _____

Date: _____

Sponsorship

We declare that above name is personally known to us and is a fit and proper person to be considered as a member of the Club. We hereby sponsor his membership to the Club and agree to be jointly and severally liable to the club for all debt and other liabilities to the Club which may be incurred by him or his family. We agree to be responsible for the good and proper conduct to the application and his family during this period.

A. Proposer

Name : _____

Address : _____

Business Employer's Address : _____

Membership No : _____

Signature : _____

B. Seconder

Name : _____

Address : _____

Business Employer's Address : _____

Membership No : _____

Signature : _____

Note : Each application to be an Associated Member must be sponsored by the current member of the Club. For employee of government or statutory bodies, application must be accompanied by a letter of recommendation from the Head of Department. The Executive Committee may at its discretion of reject this application.

FOR OFFICE USE

1) Date Received : _____

2) Verification of Sponsors :

3) Executive Committee : i) Approved :

ii) Rejected :

4) Membership No : _____

5) Approved By : _____

i) President : _____

President Name : _____

ii) Club Manager/ Secretary: _____

Club Manager's Name : _____

ENTRANCE AND MONTHLY SUBSCRIPTION

1. Associates and Term members shall not have the right to hold office in the club
2. Associates and Term members shall have no voice or vote in the affairs or management of the Club.
3. All membership is non-transferable
4. Monthly subscription shall be payable in advance on first day of each month.

KGRP MEMBERSHIP

Checklist for the complete application form

1. PHOTOGRAPH (2 pcs each)

- Applicant (2 pcs each)
- Spouse (if any)
- Child (if any)

2. PHOTOCOPY of IC (for Malaysian)

- Spouse (if any)
- Applicant

3. Passport Copy and Employment Pass (non-Malaysian)

- Applicant
- Spouse

4. Type of Membership

TERM MEMBER

- 6 Months
- 1 Year

ASSOCIATE MEMBER

- Government
- Non-government

Membership Number: _____