

ALPG NEW MEMBERSHIP APPLICATION (Full name of Applicant) Of. (Address) Hereby apply to become a Member of Australian Ladies Professional Golf Incorporated. In the event of my admission as a member, I agree to be bound by the Rules and By-Laws of the Incorporated Association. Note: First year of membership is classified Provisional. Subject to approval, provisional membership is transferred to full membership at the completion of one year. We the undersigned, being full members of Australian Ladies Professional Golf Incorporated, do hereby nominate the applicant named above for membership of Australian Ladies Professional Golf Incorporated. Member's Name Signature Signature **GST NOTIFICATION** For active Tour players, in relation to the payment of prizemoney, please circle a), b), or c) as applicable: I have an ABN and am registered for GST I have an ABN but am not registered for GST b)

Please refer to attached letter, re GST, for explanation of the impact of the above scenarios.

PAYMENT OPTIONS

My ABN is.....

(This must be the number issued in relation to the individual, not a business).

- Step 1 Post completed Membership Application Form to ALPG, PO Box 447, Mudgeeraba Qld 4213 OR Scan application and email it to gameon@alpg.com.au
- Step 2 ALPG will be in contact regarding your application and advise payment procedures if application is successful

Office Use Only

c)

I do not have an ABN and am not registered for GST



MEMBERSHIP & PLAYER PROFILE FORM

Please fill out the following details in full. This information is used for website and media purposes as well as the ALPG office and **MUST** be completed as a condition of application for membership.

PERSONAL DETAILS

Surname:	Christian Names:
•	ament draw sheet, results etc (if different to above)
	Post Code:
Telephone No: (home)	Mobile:
Telephone No: (business)	E-Mail:
Date of Birth:	Birthplace:
Height: Hair C	Colour: Eye Colour:
MaritalStatus:	Partner's Name:
Maiden Name:	
Twitter @:	
Person or persons having most influence	ee on career to date:
Current hobbies and interests:	
Secondary contact details (family memlyou).	ber, spouse etc.) in case of emergency or if ALPG unable to contact
Name:	
Relationship:	Phone: Mobile:

it curr	ently professional:
Memb	ership of other Ladies Professional Golf Organisations:
Date j	pined:
Caree	r highlights (on other professional Tours):
If PGA	A of Australia Trainee
PGA c	of Australia letter of recommendation attached. (Compulsory with application) YES/NO
Year (Commenced:
Home	Course:
Head	PGA Professional:
If curr	rently Amateur:
Currer	nt Golf Australia Handicap: (GA verification required)
(a)	National Representation details
(b)	State Representation details
(b)	Other Achievements (club championships, course records, open tournaments, etc)

Current Coach:
Name: Location:
Sponsorship (if applicable)
Major Sponsor:
Equipment:
Clubs:Ball:
Clothing:
Any other matters of interest such as representation in other sports, famous relatives etc. :
Education:
Primary:
Secondary:
Tertiary:
Please give details of any additional academic, technical or personal achievements or qualifications:
Employment:
Please provide current employment details. If club or teaching professional, name of Club, when commenced and any other information of interest.
If retired or a non active Tour player, do you wish to have your player profile and tournament history displayed on the ALPG Website?
Bank Account Details:
Account name:
Bank name:
Branch – BSB:
Account Number:

Please send via email or disc 2 photos in high resolution jpeg format as follows:

(1) head/shoulders (2) action shot

Please advise the ALPG Office if any of the above details change.