



## CONFIRMATION OF GOLF NSW MEMBER DISTRICT DELEGATE

### for Country District Golf Associations

If the fields below are filled with the name/s and details of previously advised Golf NSW Member District Delegates, please check the correctness of the information, amend if necessary and return the form to Golf NSW.

Should the details be incorrect or missing, please enter the correct name/s and information in the column provided and return the endorsed form as per instructions below. Please note, Districts are required to have at least one Delegate to Golf NSW, but may have more (Male and or Female).

<b>Golf NSW Country District:</b>		
<b>Golf NSW Member District Delegate:</b>		
Street/Postal Address:		
Telephone:		
Email:		
<b>Golf NSW Member District Delegate:</b>		
Street/Postal Address:		
Telephone:		
Email:		
<b>Golf NSW Member District Delegate:</b>		
Street/Postal Address:		
Telephone:		
Email:		

**The primary role of Golf NSW Member District Delegates is to vote on behalf of the Member District.**

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**NAME:** District Secretary /Office Holder

**SIGNATURE:**

**Please return to Golf NSW:**

Via email: [wynter.hines@golfnsw.org](mailto:wynter.hines@golfnsw.org)

Via fax: (02) 9505 9199

Via post: Wynter Hines - Office Administrator  
Golf NSW  
P O Box 195  
Arncliffe NSW 2205

*Prompt return of this form will be much appreciated*

**PLEASE RETURN FORM NO LATER THAN 20 JUNE 2014**