

DEVELOPMENT APPLICATION



PERSONAL INFORMATION

DATE OF APPLICATION: _____

NAME & SURNAME (PARENTS): _____

SECTION: (A + B Sections require motivation)

Section A - Club Subsidy

Section B - Model C School

Section C - Private Student

(R450-00 per Term, payable in advance)

RESIDENTIAL ADDRESS: _____

POSTAL ADDRESS: _____

ID NUMBER: (Parents) _____

NAME OF EMPLOYER: _____

PHONE NUMBER/S: (Home) _____

(Work) _____

(Cell) _____

EMAIL ADDRESS: _____

CHILD'S NAME: _____

CHILD'S ID NUMBER: _____

DATE OF BIRTH: _____

AGE: _____

GENDER: MALE FEMALE

SCHOOL: _____ GRADE: _____

Address: 1 Raapenberg Road, Mowbray, 7700, P.O.Box 38003, Howard Place, 7450
Tel: +27 (0)21 685 3018 **Fax:** +27 (0)21 686 0003 **Email:** info@kingdavidmowbraygc.co.za **Website:**
www.kingdavidmowbraygolfclub.co.za

Banking Details: First National Bank, Branch Code: 260 209, Account Number: 626 267 614 74

GENERAL INFORMATION

Other extra-mural activities: _____

Has your child played golf before? YES NO

Does your child have any disabilities? YES NO

Medical allergies/concerns? YES NO

Any golfers in the family? YES NO

Who? _____

Club membership anywhere? YES NO

Where? _____ Handicap: _____

INDEMNITY

I, _____ parent of, _____ hereby submit my application for KDM GC Development programme. I understand that it will require a 3 month commitment. I also understand that if my child falls into Section C, fees are due in advance and I am liable for these fees until a formal letter of resignation from the programme has been recieved by the club 30 days in advance.

Signature _____

Date: _____

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