

NYALI GOLF & COUNTRY CLUB

P.o Box 95678-80106, Mombasa Kenya Tel: 0726 414477 / 0733 414477 / 020 2024799 Email: info@nyali.co.ke

Application for Membership

Comments can be recorded on the reverse

USE UPPERCASE		ı				_			
Process	First Name								
1. Sec A to be filled in	Middle Name	ddle Name							
by Applicant and passport size photo	Family Name								
affixed	P.O. Box No								
2. Sec B to be filled by Proposer &	Street / No								
Seconder	Town / City								
Proposer & Seconder	Country	Post/Zip Code]
must be voting members of Nyali	ID or Passport No	ID / PP (tick one)					Sec B: Propos	er / Secondo	er
Golf & Country Club for at least 2 years.	Telephone	Mobile Work							
Tot at least 2 years.	Email					We, the undersigned , know the applicant and are satisfied that the candidate is of good standing financially & in public			
3. Duly completed &	Profession								
signed Form to be sent to Finance	Employer/School						Bro	poser	
Committee with the	Date of Birth	dd.mm.yyyy				Name	PIU	posei	
appropriate fees & document	Membership Class	~Double	Single	^Junior	#Student	Sign			
4. Sec C (on reverse)	Membership Type	Full	onigic	Social	#Otudent	Sign		,	
to be filled by Finance Department.					1		Sec	onder	
5. If all in order,	~If class selected is Do	ouble Please p	rovide the	following	details:	Name			
Temporary Swipe card will be issued &	Spouse Name					Sign			
Applicant can start	* Children under 21		ert. to be p	Sec D: Introductions (after Sec A,B &C)					
utilising the Club's facilities	First Name	Date of Birth dd.mm-yyy		Age	Gender		Name	Signature	
6. Form will be									
handed to Proposer to complete Sec D							Chair	person	
7. After the									
Introductions are complete, Form will									
be posted on Club								T	
Notice Board for 30 days for notification	* Children 21 Years &	L Years & over require separate membership							
to other members	^ Junior (16 to 21 Ye				Trea	surer			
8. Application will be considered by Main	# Student (Under 25	Years) - recei	ceiving full time education						
Committee after the	# To be filled in by St	f submitte	ed		Sec	retary			
30 days and final					300				
outcome communicated to	Institution	Name		Tel		-			
Proposer	Contact (Dean etc)								
Documents (copies)	Affiliations to	s (Sport	s / Servic						
1. National Identity	Club	Positions Held		Years					
Card or Passport 2. Proof for Juniors &									
Students									
3. 2 Passport size									
photos					<u> </u>				
In case of Emergency : Fill in details overleaf									
I hereby apply for mer	mbership of Nyali Golf &	Country Clii	b. I certifi	/ that all th	ne details] \coprod			
above are true. I have read the Memorandum & Articles of Association and Bye-Laws of									
th	ne club (attached) and a	accept to abi	de them.						
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			Арр	licatior	n for M	embers	ship		
		Nam	-	Teleph	one				
	Next of Ki	n							
Fa	amily Docto	or							
Prefer	red Hospita	al							
Blood Group							-		
	ne Allergies						-		
MEGICII	ie Alleigies	·: [
				Of	ficial U	se			
		Se	c C: Fina	ance & Ad	min		Sec E: Membership Approval		
		1	Chec	klist Amount			Name	Signature	
	_	Date Received		Paid			Chair	person	
	-	Proposer Status		Receipt No			Chang	T	
	-	Seconder Status		Date Paid			Sacr	etary	
	-	Details/Docs chkd		Date Public					
	_	*Fees Calculations	Na	Temp No.	Sign	ature	Meeting Date	Curino Corrd	
		Verified Membership Committee Convener	740			21470	Membership Card issued	Swipe Card issued	
		*Fees	Туре		Class		* Communication	Date/Ref	
		Application					Start Introductions		
		Subs - one quarter					On Notice Board		
		Total					Committee Review		
							Acceptance *Proposer & Applicant to be	informed	
Comments	Date		Notes					Signature	
[Date		IN				Name	Signature	
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