

R I V I E R A 
on vaal
country club & restaurant

Tel: +27 (0) 16 430 1380
finance@rovcountryclub.co.za

Name/Naam: _____

CONFIDENTIAL
VERTROULIK

APPLICATION FOR MEMBERSHIP / AANSOEK OM LIDMAATSKAP

(ALL DUES MUST ACCOMPANY THIS APPLICATION / ALLE FOOIE MOET HIERDIE
AANSOEK VERGESEL)

CLASS OF MEMBERSHIP APPLIED FOR / SOORT LIDMAATSKAP WAARVOOR
AANSOEK GEDOEN WORD

(Mark with "X" in appropriate square / merk toepaslike vierkant met "X")

MEN
MANS

LADIES
DAMES

FAMILY
FAMILIE
(Husband and wife)

SQUASH/
TENNIS

JUNIOR
(12 – 18yrs)

YUPPIE
(22 – 25yrs)

CORPORATE

PENSIONER
(60+)

STUDENT

To: The Management
Aan: Die bestuur
Riviera on Vaal Country Club
Vereeniging

(Date / Datum)

1. I hereby apply to be admitted to Membership of the Riviera on Vaal Country Club as a Member in accordance with its Constitution and Rules, which are now or hereafter may be in force, and if cleared I undertake to pay subscription on due date.

Ek doen hiermee aansoek om toetreding tot Lidmaatskap van die Riviera on vaal Buiteklub as Lid, in ooreenstemming met die Konstitusie en Reels, wat nou van krag is of nog mag wees, en indien ek verkies word, onderneem ek om subskripsies op verval datum te vereffen.

2. I submit the following personal particulars:

Ek verstrek die volgende persoonlike besonderhede:

Dr / Mr / Mrs / Miss
Dr / Mnr / Mev / Mej

FULL NAMES AND SURNAME

VOLLE NAME en VAN _____

RESIDENTIAL ADDRESS

WOONADRES _____

TELEPHONE No

TELEFOON Nr _____

PO BOX No

POSBUS Nr _____

CELL No

SELFOON Nr _____

EMAIL: _____

BUSINESS ADDRESS

BESIGHEIDSADRES _____

(Mark with "X" in the appropriate square above to which address correspondence should be sent)

(Merk die adres waarheen korrespondensie gestuur moet word met 'n "X" in die toepaslike blok)

3. DETAILS of my profession, occupation, or business, with name of Firm, Company or business
BESONDERHEDE van my profesie, beroep, of besigheid, met naam van Firma of Maatskappy:

NAMES and particulars of any other members of my family who are members of the club:

NAME en besonderhede van enige ander lede van my familie wie lede van die klub is:

4. I previously belong to the following Clubs (South Africa or other)

Ek behoort aan die volgende Klubs (Suid-Afrikaans of ander)

I have belonged to the following Clubs (South Africa or other)

Ek het voorheen aan die volgende Klubs behoort (Suid-Afrikaans of ander)

Junior further particulars

(If junior, give name of parent, Guardian or other who is a member of the club)

Ek verstrek verdere besonderhede

(Indien 'n junior, gee naam van Ouer, Voog of ander wie 'n lid van die Klub is)

5. I have never had an application for Membership withdrawn and I have never been reject by any Club. (If you have had an application withdrawn or rejected, give Details)

Geen aansoek van my lidmaatskap is nog ooit ontrek nie, en geen Klub het my nog ooit afgekeur nie. (Indien u aansoek al ooit afgekeur is, gee besonderhede)

I have nor have my parents ever changed my or their names (If a change has taken place, give details)

Ek of my ouers het nog nooit my of hulle name verander nie (Indien 'n verandering plaasgevind het, gee besonderhede)

If elected, I undertake to notify the Club Secretary of any change of my address

Indien verkies, onderneem ek om die Klub Sekretaris in kennis te stel van adresverandering

6. I UNDERSTAND THAT CONTRAVENTION BY ME OF ANY OF THE UNDERTAKINGS OR STATEMENTS GIVEN ABOVE SHALL CONSTITUTE A BREACH OF THE CONSTITUTION AND RULES OF THE CLUB AND INVALIDATE MY MEMBERSHIP, IF ELECTED, OR THIS APPLICATION

EK VERSTAAN DAT ENIGE OORTREDING DEUR MY VAN ENIGE VAN DIE ONDERNEMING OF VERKLARING BO AANGEGEE 'N VERBREKING VAN DIE KONSTITUSIE EN REELS BETEKEN EN MY LIDMAATSKAP, INDIEN VERKOSE ONGELDIG SAL WEES ASOOK HIERDIE AANSOEK.

7. NB:

- **YOUR ANNUAL SUBSCRIPTION IS AUTOMATICALLY RENEWED UNLESS YOU RESIGN.**
- **NO REFUNDS WILL BE GIVEN IF YOU RESIGN BEFORE YOUR YEAR SUBSCRIPTION COMES TO AN END.**
- **IF I WISH TO RESIGN AS A MEMBER FROM THE CLUB; THIS MUST BE DONE IN WRITING OR VIA EMAIL TO finance@rovcountryclub.co.za WHO WILL ACKNOWLEDGE RECEIPT OF THE RESIGNATION. UPON RESIGNATION, ALL OUTSTANDING SUBS MUST BE PAID.**
- **IF NO PROOF OF RESIGNATION IS AVAILABLE, I WILL BE RESPONSIBLE FOR ALL OUTSTANDING SUBS, NO EXCEPTIONS.**
- **YOUR HANDICAP CARD WILL BE MADE INACTIVE IF YOUR DUES ARE NOT UP TO DATE.**
- **WE WILL NOT RELEASE YOU TO ANOTHER CLUB IF YOUR DUES HAVE NOT BEEN SETTLED BY THE TIME YOU RESIGN**

(Applicant / Applikant) (Ouer of Voog)

Date of birth

Place of Birth

Geboortedatum _____

Plek van geboorte _____

I.D. No.

I.D. Nr. _____

Survey:

Please take some time to fill in the questions below in order for us to make your membership a better experience.

Why do you want to join Riviera on Vaal Country Club?

What is the reason for leaving your previous club?

What do you expect from your home club / management?

DEBIT ORDER AUTHORISATION FORM

Authority

Given by: (Name of Account Holder)

Address: _____

E-mail: _____

Telephone Number: Work: _____

Cell: _____

Hereby instruct and authorize Riviera on Vaal Country Club to debit my bank account every month on _____ of the month, for the amount of R_____. All such withdrawals from my bank account shall be treated as though I had signed them personally. I understand that the withdrawal hereby authorized will be electronically generated and I also understand that details of each withdrawal will be printed on my bank statement. I agree to pay charges relating to this debit order instruction. Annual increases on Membership Subscriptions will be communicated to you 30 days prior and your debit order amount will be adjusted accordingly.

I may cancel this authorization/instruction by notifying Riviera on Vaal Country Club, giving 30 days' notice in writing, per registered post. However, I understand that I shall not be entitled to any refund of amounts which were withdrawn/processed whilst this authorization was in force.

BANK DETAILS

Account Holder _____ (Full Names)

Name of Bank _____

Branch Name _____ Branch Code _____

Account Number _____

Account Type (e.g. cheque/savings) _____

Signed at _____ (town/city) On this the _____ Day of
_____ (Month) _____ Year.

Please attach a copy of your Bank Statement or a letter from your bank.

Signature