

# Membership Form 2023

TOWER LINKS GOLF CLUB

Email: [membership@towerlinks.ae](mailto:membership@towerlinks.ae)

Website: [www.towerlinks.ae](http://www.towerlinks.ae)



TOWER LINKS  
تاور لينكس  
GOLF CLUB  
RAS AL KHAIMAH  
UNITED ARAB EMIRATES

<b>Full Year Membership 1<sup>st</sup> January – 31<sup>st</sup> December 2023</b>													
<input type="checkbox"/> <b>INDIVIDUAL (7 DAY)</b> <input type="checkbox"/> ADULT 35+ <input type="checkbox"/> INTERMEDIATE 18-34			<input type="checkbox"/> <b>INDIVIDUAL (4 DAY)</b> <input type="checkbox"/> ADULT 35+ <input type="checkbox"/> INTERMEDIATE 18-34			<input type="checkbox"/> <b>FAMILY</b> <input type="checkbox"/> FAMILY (7 DAY) <input type="checkbox"/> FAMILY (4 DAY)			<input type="checkbox"/> <b>JUNIOR</b> <input type="checkbox"/> 17 YRS & BELOW				
<b>MEMBER OF A SECOND CLUB</b>		Y	N	IF YES PLEASE NAME OTHER CLUB									
FIRST NAME													
SURNAME													
MOBILE:						TEL:							
EMAIL:													
DOB (dd/mm/yyyy):			/		/	GENDER		M	/	F			
SPOUSE NAME													
SURNAME													
MOBILE:						TEL:							
EMAIL:													
DOB (dd/mm/yyyy):			/		/	GENDER		M	/	F			
CHILD NAME (1)													
DOB (dd/mm/yyyy):			/		/	GENDER:		M	/	F			
CHILD NAME (2)													
DOB (dd/mm/yyyy):			/		/	GENDER:		M	/	F			
MEMBERS WHAT'S APP GROUP – I wish to be added									Y	/	N		
IF NUMBER DIFFERENT TO MOBILE, PLEASE ADD HERE -													
MEMBERS LOCKER – I wish to avail a permanent locker									Y	/	N		

# Payment Plan

Please indicate the membership category you wish to avail by ticking the appropriate box.

	<u>2 Payments</u>	<u>3 Payments</u>	<u>4 Payments</u>
<input type="checkbox"/> <b>Individual Adult 35+</b>			
7 DAY <input type="checkbox"/> 13000	<input type="checkbox"/> 2 X AED 6750	<input type="checkbox"/> 3 X AED 4585	<input type="checkbox"/> 4 X AED 3500
4 DAY <input type="checkbox"/> 7500	<input type="checkbox"/> 2 X AED 3750	<input type="checkbox"/> 3 X AED 2750	<input type="checkbox"/> 4 X AED 2125
<input type="checkbox"/> <b>Individual Intermediate 18 - 34</b>			
7 DAY <input type="checkbox"/> 10000	<input type="checkbox"/> 2 X AED 5250	<input type="checkbox"/> 3 X AED 3585	<input type="checkbox"/> 4 X AED 2750
4 DAY <input type="checkbox"/> 5750	<input type="checkbox"/> 2 X AED 3125	<input type="checkbox"/> 3 X AED 2170	<input type="checkbox"/> 4 X AED 1690
<input type="checkbox"/> <b>Family</b>			
7 DAY <input type="checkbox"/> 20000	<input type="checkbox"/> 2 X AED 10375	<input type="checkbox"/> 3 X AED 7045	<input type="checkbox"/> 4 X AED 5375
4 DAY <input type="checkbox"/> 11500	<input type="checkbox"/> 2 X AED 6125	<input type="checkbox"/> 3 X AED 4210	<input type="checkbox"/> 4 X AED 3250
<input type="checkbox"/> <b>Junior Up to 17</b>			
<input type="checkbox"/> 3000	<input type="checkbox"/> 2 X AED 1600	<input type="checkbox"/> 3 X AED 1100	<input type="checkbox"/> 4 X AED 850

**Payment Instalment Approval**

The membership payment can be paid in full or with a payment plan as set out above. For installment method, post-dated cheques must be submitted as balance payment to complete membership term.

I hereby apply for membership at Tower Links Golf Club. I agree to abide by the Club's Rules and Regulations as detailed.

Signature: \_\_\_\_\_

Date:     /     /

**STAFF USE ONLY**

PAYMENT:	CASH	CHEQUE	CREDIT CARD			
MEMBERSHIP FEE		INSTALMENTS:	1	2	3	4

**Payment:** (1) Date: \_\_\_\_/\_\_\_\_/\_\_\_\_    AED \_\_\_\_\_    Payment (2) Date: \_\_\_\_/\_\_\_\_/\_\_\_\_    AED \_\_\_\_\_

**Payment:** (3) Date: \_\_\_\_/\_\_\_\_/\_\_\_\_    AED \_\_\_\_\_    Payment (4) Date: \_\_\_\_/\_\_\_\_/\_\_\_\_    AED \_\_\_\_\_

**Cheque No.** (1) \_\_\_\_\_ (2) \_\_\_\_\_

(3) \_\_\_\_\_ (4) \_\_\_\_\_

**EGF Fees** \_\_\_\_\_

**Locker No.** \_\_\_\_\_

Processed By: \_\_\_\_\_

Date:     /     /