

P.O.Box No. 541, 90706, Sandakan, Sabah, Malaysia. Tel: 089-660557 Fax: 089-660584

CHECKLIST FOR TRANSFER OF MEMBERSHIP

TRANSFEROR TRANSFEREE Witness should be signed by a Lawyer Witness should be signed by a Lawyer or Commissioner for Oaths. or Commissioner for Oaths. Membership Certificate must be 3 copies of Drivers Licence size photograph must be enclosed. surrendered back before the transfer can be processed. 3 copies of Drivers Licence size Membership card must be surrendered back before the transfer can be processed. photograph of Spouse must be enclosed (if the spouse to be registered as Associate Member). Birth Certificate copy of the transferee The outstanding accounts of the transferor must be cleared before must be enclosed. the transfer can be processed. 3 copies of Drivers Licence size photograph of the children must be enclosed. To pay 2 months' advance Subscription (if applicable) (Any surplus will be refunded after approval of transfer) Photostate copy of Identity Card or Passport must be enclosed. Photostate copy of Spouse's Identity Card or Passport and photostate copy of birth certificate of the childern must be enclosed. Photostate copy of Marriage Certificate must be enclosed (if applicable)

- APPLICATION FORM MUST BE SUBMITTED FROM THE 01ST UNTIL 07TH OF THE MONTH OR ELSE WILL BE CARRIED TO THE FOLLOWING MONTH. IN ADDITION. ALL APPLICATIONS MUST BE POSTED 2 WEEKS PRIOR TO THE GENERAL COMMITTEE MEETING.
- TRANSFER FEE OF RM2,000.00 (MALAYSIAN)/RM8,000.00 (FOREIGNER)
 AND DEVELOPMENT FEE OF RM2,500.00 MUST BE ENCLOSED
- DO YOU WISH TO BE INSURED WITH GOLFERS' INSURANCE: YES

The Secretary
Sandakan Golf & Country Club
P.O.Box No. 541,
90706 Sandakan,
Sabah, Malaysia.

I give below my full particulars : -

Name in full (Block Letters)



Date			
-	 		

RE: APPLICATION FOR MEMBERSHIP

I.C. / Passport No	Date of Birth	
Occupation		
Company Name / Department		
Postal Address		
Residence		
Telephone Number : Office	House	
Member of other Clubs	Handicap	
If married, name of spouse		
Name of children Date of bird	th Name of children Date of birth	
1	5	
2	6	
3	7	
4.	8	
	s of the Club and to pay to the Club any outstanding fore my / our membership becomes effective and also embership.	
	Signature of Transferee	
Proposer's Name: M/Ship I	No.:	
Proposer's Signature:		
Seconder's Name: M/Ship I	No.:	
Seconder's Signature: P O BOX 541 . 90706 . SANDAKAN . SABAH .	MALAYSIA . TELE PHONE 660557 . 660555 . FAX 660584	

To: The Hon. Secretary
Sandakan Golf & Country Club
P.O.Box No. 541
90706 Sandakan,
Sabah, Malaysia.



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Date		
Date		_

APPLICATION FOR TRANSFER OF MEMBERSHIP

Membership No.	I.C. / Passport No	hereby apply to transfer my		
our Ordinary / Corporate Member	rship Number	under SG&CC		
Certificate Registration Number_	t	0		
I.C. / Passport No.		Subject to the		
approval of the General Committee	ee.			
I / We enclose the Form of Trans	fer duly completed toge	ether with my / our membership certificate		
for your necessary action.				
Signature of witness		Signature of transferor		
Date :	1	Date:		
Name :	1	Name :		
(In Block Letters)	((In Block Letters)		
Address:	,	Address:		
I / We		(Transferee)		
I.C. / Passport No (if any)	agree to	accept the above-mentioned membership,		
if approved by the General Comm	nittee. I / We further ag	ree to abide by the Rules and Bye-Laws of		
the Club and to pay to the Club a	ny outstanding dues or	debts owing from the Transferor before my		
our membership becomes et	ffective and also to p	pay the transfer fees on the transfer of		
membership.				
Signature of witness		Signature of transferee		
Date :	(Date:		
Name :	1	Name :		
(In Block Letters)		In Block Letters)		
Address:	AN CADAU MAI AVCIA	Address:		



FORM OF TRANSFER OF ORDINARY / CORPORATE MEMBERSHIP

SECTION I	SECTION II		
(To Be filled by Transferor)	(To Be filled by Transferee)		
(Name of Transferor) Membership No	NRIC / Passport No(if applicable)		
of	of		
(Address of Transferor)	(Address of Transferee)		
hereby transfer my / our Ordinary / Corporate Membership to the person named in Section II.	hereby accept the membership referred to in Section I of this Form.		
Date Signature SECTION III (FO	Date Signature R OFFICIAL USE)		
<u> </u>			
Date Received	Date Approved		
Outstanding A/C	Date of Registration of transfer		
Entrance Fee RM	Date of Notification		
Current A/C RM	By		
Total RM	Remarks		
Cheque No.			
Receipt No.			
Deposit RM			
Cheque No.			
	LAYSIA . TELEPHONE 660557 . 660555 . FAX 660584		