



MF-15a/0423

SPOUSE MEMBERSHIP APPLICATION FORM (FULL MEMBERSHIP)

Please complete and return the form to: Membership Department, Orchid Country Club, 1 Orchid Club Road, Singapore 769162 or via email at membership@orchidclub.com

Name of Principal Member _____

Membership No. _____

PARTICULARS OF SPOUSE

SPOUSE OPTION (Please tick one)

- ☐ Opt-in Spouse for use of **SOCIAL FACILITIES ONLY** at a monthly subscription of **\$5.45***.
- ☐ Opt-in Spouse for use of both **GOLFING AND SOCIAL FACILITIES** at a monthly subscription of **\$21.80***.

Name in Full (Underline Surname) _____ Salutation _____

Date of Birth _____ NRIC/Passport No. _____

Nationality _____ Mobile No. _____

Email Address _____

Name of Employer _____

Profession/Designation _____

My current Golf Handicap Index is _____ maintained at _____

GOLF INSURANCE (Please tick if you wish to opt out) ☐ Opt Out

There is a moratorium period of 6 months (from the date of the option) for members who opt for the usage of social facilities only. If a member decides to change this option before the expiry of the six-month period, an administrative fee of \$54* shall be imposed.

**Inclusive of 9% GST at 9%.*

NOTES:

- Kindly submit a scanned copy/photo of your **marriage certificate**, your **spouse's NRIC/Passport** and colored **Passport-Size photograph** for processing of membership card and golf bag tag (*if applicable*).
- Membership Department will notify members for the collection of the card.
- Spouse membership will be effective on the **1st of following month**.

DECLARATION

I hereby declare that the information provided is true and accurate. I agree to abide by all the Rules and Regulations of the Club as stated in the Constitution and those that may from time to time be enforced. I agree to be responsible for the conduct or any debt or liability incurred by my spouse.

Signature of Principal Member

Date