

## 2020 INDIVIDUAL MEMBERSHIP FORM

**TO BE COMPLETED FOR MEMBERSHIP TO THE BIG EASY IGT CHALLENGE TOUR**

<b>SURNAME</b>			
<b>NAME</b>			
<b>KNOWN AS</b>	<b>TITLE:</b>		
<b>DATE OF BIRTH</b>	<b>DAY</b>	<b>MONTH</b>	<b>YEAR</b>
(Country Flag on web) <b>NATIONALITY</b>			
(For Press releases) <b>HOME TOWN</b>			
(Upcoming events & Admin) <b>CELL</b>			
(Upcoming events) <b>CELL 2 (Optional) e.g. Parent</b>			
(Tee times, Results & News sent to email ONLY) <b>EMAIL</b>			
(Tee times, Results & News sent to email ONLY) <b>EMAIL 2 (Optional) e.g. Parent</b>			
<b>PLAY AS PRO OR AMATEUR</b>	<b>PRO</b> <input type="checkbox"/>	<b>AMATEUR</b> <input type="checkbox"/>	
<b>GOLF CLUB if any</b>			
<b>ACADEMY OR SPONSOR if any</b>			

### **Membership Fee for 2020 Season**

All applications for Membership must be accompanied by payment of annual fee as set out below before membership activation.  
(Non-members receive no Order of Merit points & pay Non-member Tournament Fee)

Please tick appropriate;

**Option 1**

R2000 if paid before 31 December 2019

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**Option 2**

R2500 if paid after 1 January 2020

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IGT Bank Details: Please include **YOUR NAME** as reference

Beneficiary: IGTGolf

Bank: FNB Account No.: 62284422046

Branch Code: 251141

Branch: Clearwater Account: Current

**Email to [admin@igtgolf.org](mailto:admin@igtgolf.org) or FAX THIS PAGE TO 086 608 4653**

I agree to abide by the Rules, Regulations and Constitution of the IGT Pro Tour and by any changes made and notified to me.  
I hereby authorise that the particulars contained in this application may be used at the discretion of the IGT Pro Tour.

**Signed:**

**DATE:**

**IGT USE ONLY --**

**MEMBERSHIP PAID:**

**Membership #**

**DATE RECEIVED:** \_\_\_\_\_

**TENDER:** \_\_\_\_\_

**#:** \_\_\_\_\_