

NATIONAL SERVICE RESORT & COUNTRY CLUB

10 Changi Coast Walk Singapore 499739 Tel: 6540 8588/43 Fax: 6545 6508

BEGINNER GOLFER'S INSURANCE APPLICATION FORM (Fixed Period: 1 April 2024 to 31 March 2025)

(A) Particulars of Applicant

Member's Name :		Membership No:	
Address :			
Contact No:	(Office)	(Mobile)	
(B) Premium Payn Premium amount: St	<u>nent</u>		
Payment By:	☐ Amex ☐ Visa/Mastercard ☐ Nets ☐ Cash / Cheque ☐ In-House (For member)	rs only)	
iii) The premium wil rated for midway	years old. o have not passed proficiency test l not be pro-rated if you apply aft withdrawal. The policy is not conv	and do not have a handicap. Ster 1 April 2024. The premium will not be provertible or transferable during the insured periodude the information "Beginner, NRIC" behind	d.
i) warrant that the in	nsurance specified here and declare nformation given above are true an e terms and conditions contained i		
Sign	nature of Applicant	Date	