

## **Membership Application Form**

## **1**<sup>st</sup> January 2025 – 31<sup>st</sup> December 2025

Applicant:	Gender (F/M):
Nationality:	Date of Birth:
Company Name:	
Position/Profession:	
Mobile No:	E-Mail:
Golfers only: Handicap: (Please	e enclose HCP. cert)
Additional Family Members:	
Spouse:	Date of Birth:
Child 1:	Date of Birth:
Child 2:	Date of Birth:
Child 3:	Date of Birth:
Child 4:	Date of Birth:
Child 5	Date of Birth:



Please list two Personal References	both should preferably be ex	isting members at Katameya Dunes	Golf Club:
Name:			
Phone no:			
Name:			
Phone no:			
Documents Required:			
• •	nber's valid passport or Nati noto for each applicant.	onal ID (Egyptians only)	
Foreign residents or	nly are required to provide a	an official proof of residency or wor	k permit.
Basic Terms & Conditions:			
<ul> <li>All applicants agree to abide attached with this applicati</li> <li>Any information submitted</li> <li>This membership is nontrare</li> </ul>	e by the club rules & regula on. falsely will lead to terminat nsferable and nonrefundabl	·	cial club as
Applicant Signature:	Da	ite:	_
For Club Admin use only:			
Membership Plan: L / G / S / GO	Type: Social/ full golf	Extras: Locker/bag storage	
Membership ID#		Valid to:	
Receipt No. #	Date of Payment: .		
Charkad by	Approved by		