



APPLICATION FORM FOR CORPORATE

TENURE MEMBERSHIP

(KENSVILLE GOLF & COUNTRY CLUB)

(USE CAPITAL LETTERS)

BUSINESS DATA

COMPANY NAME	DESIGNATION	
NATURE OF BUSINESS		
BUSINESS ADDRESS		
CITY	PIN	COUNTRY
TELEPHONE	TELEX	FAX

(TENURE OF MEMBERSHIP IS 25 YEARS)

PERSONAL DATA - MEMBER 1

NAME MR/MS/MRS/DR.	DESIGNATION	
NATIONALITY	PAN NO.	DATE OF BIRTH
E-MAIL ID	PH NO.	

PERSONAL DATA - MEMBER 2

NAME MR/MS/MRS/DR.	DESIGNATION	
NATIONALITY	PAN NO.	DATE OF BIRTH
E-MAIL ID	PH NO.	

PERSONAL DATA - MEMBER 3

NAME MR/MS/MRS/DR.	DESIGNATION	
NATIONALITY	PAN NO.	DATE OF BIRTH
E-MAIL ID	PH NO.	



**APPLICATION FORM FOR INDIVIDUAL
(KENSVILLE GOLF ACADEMY)
(USE CAPITAL LETTERS)**

PERSONAL DATA

NAME MR/MS/MRS/DR.	DATE OF BIRTH
NATIONALITY	OCCUPATION
PASSPORT NO.	VALID UPTO
E-MAIL ID	ISSUED BY
	PAN NO.

STATUS

INDIAN DIPLOMAT OTHER FOREIGN PASSPORT HOLDER

PRESENT RESIDENTIAL ADDRESS

CITY PIN COUNTRY

MOBILE FAX

PERMANENT RESIDENTIAL ADDRESS

CITY PIN COUNTRY

MOBILE FAX

TYPE OF MEMBERSHIP

PLATINUM PLUS (5 Yrs.)	<input type="checkbox"/>	PLATINUM (5 Yrs.)	<input type="checkbox"/>
GOLD (3 Yrs.)	<input type="checkbox"/>	SILVER (1 Yrs.)	<input type="checkbox"/>
BRONZE (6 Mth)	<input type="checkbox"/>	STANDARD (1 Mth)	<input type="checkbox"/>

* As per terms of attached in rate card.

BUSINESS DATA

COMPANY NAME DESIGNATION

NATURE OF BUSINESS (IN CASE OF CORPORATION)

BUSINESS ADDRESS

CITY PIN COUNTRY

MOBILE TELEX FAX

CLUB MEMBERSHIP DATA

CLUB NAME _____ CITY _____ TYPE OF MEMBERSHIP _____

(GOLF HANDICAP IF ANY): SELF _____ SPOUSE _____

DECLARATION

The Membership Committee of the Kensville Golf Academy shall reserve the right to accept or reject the application of any applicant for Tenure Membership without assigning any reason and the applicant shall have no right to challenge the decision of the said Body.

I agree that the persons using the facilities of Kensville Golf Academy pursuant to this Tenure Membership are bound by and shall comply with the enclosed terms of Tenure Membership, the plan, rules and regulations of Kensville Golf Academy, as amended from time to time. I undertake to abide by and comply with the said conditions throughout the term of membership.

I understand that in the event of my application being rejected, all monies paid by me shall be refunded without interest.

I enclose herewith a cheque for Rs. _____

in favour of **Millennium Park Holdings Pvt. Ltd.**, drawn on _____

vide cheque No. _____ dt. _____ being amount due.



SIGNATURE OF APPLICANT

DATE

ENCLOSURES: 2 PASSPORT SIZE PHOTOGRAPHS OF SELF

This application form must be submitted with all the information sought in order to be processed

FOR OFFICE USE ONLY

Approved for Tenure Membership _____

Valid from _____ to _____

Tenure Membership No. _____

Receipt No. _____ Date _____

Academy Managed by :



Brandon de Souza
MANAGEMENT SERVICES
MELANGE MANAGEMENT SOLUTIONS PVT. LTD.
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