

TWIN DOVES GOLF CLUB & RESORT

DECLARATION

We/I declare that all the particulars given are true and correct. We/I understand that membership of Twin Doves Golf Club and Resort does not confer upon us/me any ownership or liability for the property and assets owned by the Club. We/I agree that we are/ I am personally liable for the payment of the applicable charges incurred by us/me, our family and guests in the use of the amenities of Twin Doves Golf Club and Resort. Our/my liability for such payment together with the person, company, partnership or unincorporated association indicated by me as being responsible for payment of the same and shall be joint and several with such person, company, partnership or unincorporated association. It is hereby acknowledged that the sum of enclosed herewith is a non-refundable Joining Fee (not applicable to Founder Members) payable upon this membership application being approved. As a Member, we/I agree to comply with and be bound by the By-Laws and Rules and Regulations of the Club, as the same may from time be amended and for the time being in force.

Member's Signature

Spouse's Signature

Date : _____

BANK DETAILS:

Woori Bank - HCM Branch

Account name: Phu My Development Joint Stock Co.

USD : DDA 912042547

VND : DDA 912022857

Direct transfer to: Woori Bank - HCM Branch

115 Nguyen Hue Street, Floor 18, District 1, HCMC.

Vietnam Bank for Industry and Trade (VIETINBANK)

TRANSACTION OFFICE II - HCMC

Account name: Phu My Development Joint Stock Co.

USD : 10202-000006590-7

VND : 10201-000057270-5

Direct transfer to: Vietnam Bank for Industry and Trade

79A Ham Nghi Street, District 1, HCMC, Vietnam.

FOR OFFICE USE ONLY

Date of Receipt : _____

Membership Category: _____

Joining Fee: _____

Membership Manager : _____

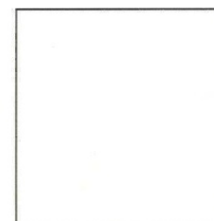
Contract No: _____

Membership No : _____

Admissions Committee : _____

Approved ☐

Not Approved ☐



Sign/ Stamp: _____

Date: _____



TWIN DOVES

GOLF CLUB & RESORT

MEMBERSHIP APPLICATION FORM



Phu My Development Joint Stock Company
HCMC Branch

Suite 501 Saigon Trade Center

37 Ton Duc Thang Street, District 1, HCMC, Vietnam

Tel (84-8) 910 3422

Fax (84-8) 910 3423

sales@twindovesgolf.com

www.twindovesgolf.com

MEMBERSHIP CATEGORY

We are applying for membership under the following category:

☐ **CORPORATE MEMBERSHIP**

☐ **INDIVIDUAL MEMBERSHIP**

CORPORATE APPLICATION

This part to be completed by Corporate Application only:

Company Name : _____

Nature of Business : _____

Business Address : _____

Email Address : _____

Business Telephone : _____

Fax No. : _____

Date of Incorporation : _____

Place of Incorporation : _____

Registration No. : _____

Paid Up Capital : _____

We certify and agree that the business/organization named above is the owner of the membership and, by virtue of such ownership, we are jointly and severally responsible for all monthly dues and charges incurred in connection with such membership. Any corporate Member, may substitute any approved nominated individual who is in employment of the company, upon payment of a non-refundable renomination fee. Each new nominated individual shall submit an application and be subject to the approval of the Admissions Committee before he/she is entitled to use the amenities of the Club.

Name

Title

Authorized Signature and Company's Stamp

Date

CORPORATE NOMINEE

Mr. ☐ Mrs. ☐ Ms. ☐

Dr. ☐ Other title ☐

Member Name : _____ Surname : _____

Passport/ ID No. : _____ Nationality : _____

Marital Status : _____ Date of Birth : _____

Home Tel. : _____ Mobile Tel. : _____

Company Name : _____

Email Address : _____ VAT Code : _____

Type of Business : _____

☐ Banking/Financial Institutions ☐ Retail Other Services
☐ Social/ Academic & Cultural Services ☐ Trading/ Manufacturing
☐ Professional Services ☐ Other

Do you wish your spouse to receive a membership card: ☐ Yes ☐ No
(If yes, fill below)

Golf club handicap ☐

Other golf club memberships : _____

SPOUSE INFORMATION

Mr. ☐ Mrs. ☐ Ms. ☐

Dr. ☐ Other title ☐

Spouse's Name : _____ Surname : _____

Passport No. : _____ Nationality : _____

Wedding Anniversary : _____ Date of Birth : _____

CHILDREN INFORMATION

(Children between 8 and 18 year of age may be issued Junior cards at their parents request)

	Name	Date of Birth	Sex
1	_____	_____	Male/Female
2	_____	_____	Male/Female
3	_____	_____	Male/Female

INDIVIDUAL (Family) NOMINEE

Mr. ☐ Mrs. ☐ Ms. ☐

Dr. ☐ Other title ☐

Member Name : _____ Surname : _____

Passport/ ID No. : _____ Nationality : _____

Marital Status : _____ Date of Birth : _____

Home Address : _____

Mobile Tel. _____ Email : _____

Company Name : _____

Company Address : _____

Tel : _____ Fax : _____

VAT Code : _____

Type of Business : _____

☐ Banking/Financial Institutions ☐ Retail Other Services
☐ Social/ Academic & Cultural Services ☐ Trading/ Manufacturing
☐ Professional Services ☐ Other

Do you wish your spouse to receive a membership card: ☐ Yes ☐ No
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Golf club handicap ☐

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