



Please complete this form and submit it to WE/K.Prasit Wienglaw copies to ST/K.Suphattra P.

APPLICATION FORM FOR MEMBERSHIP OF TG GOLF CLUB

PART A (to be filled by the member)

Name(Thai) Surname Pers.No
(English) D.O.E
Function Code : Position :

Sex : Male Female D.O.B : Nationality :

Home Address (Thai) :

Home Tel: Office Tel: e-mail:

My present handicap is Given by Golf Club
 Given by Golf Club

MEMBER FEE : THB 100.00 per month will be deducted from the undersigned's salary on a monthly basis.

Signature :

Date :

Part B (official use only)

Membership Number : Date received by the registrar :

Category of membership :

Remarks :

Part C (to be filled by the member)

To : BKKID

From : Mr/Mrs/Miss Pers.No. Code:.....

This is to authorize BKKID to deduct my salary at THB 100.00 per month for the membership fee paid to TG GOLF CLUB with immediate effect.

Applicant's Signature :

Date :

Official Signature :

Date :

ชมรมกอล์ฟการบินไทย บริษัท การบินไทย จำกัด (มหาชน) 89 ถนนวิภาวดีรังสิต กรุงเทพฯ 10900 โทร 02-545-1311 โทรสาร 02-545-3811

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