

NAME..... Mr/Mrs/Miss/Other.....  
(BLOCK LETTERS)

ADDRESS.....  
.....

POST CODE .....

HOME TEL NO .....

WORK TEL NO .....

E.MAIL ADDRESS .....

I hereby apply for Membership of the above club, subject to its rules and regulations, as a:-

- FULL MEMBER
- FULL FAMILY MEMBER
- FIVE DAY MEMBER
- FIVE DAY FAMILY MEMBER
- STUDENT (Over 18 under 23 yrs)
- JUNIOR (under 18 yrs) Date of Birth.....
- SOCIAL MEMBER

Note : Five Day Members CANNOT play on Saturday or Sunday.

Other Golf Club(s) .....

Handicap .....

SIGNED ..... DATE .....