

MEMBERSHIP APPLICATION FORM - 2012



Mr/Mrs/Miss FULL NAME.....

ADDRESS.....

.....POST CODE..... DATE OF BIRTH

email ADDRESS

TELEPHONE NO'S (H).....(W).....(M).....

OCCUPATION

Please write a few words about how you heard of membership at Bigbury Golf Club and why you applied for membership. This will help us with our marketing, thank you.

.....
.....

GOLF

Have you been or are you a member of another golf club? YES/NO

If yes, which golf club?

Do you have a current handicap? YES/NO If YES, please attach the CONGU certificate

Do you have close relatives who are members of Bigbury Golf Club? YES/NO

If yes, name of member and relationship.....

Are you a former member of Bigbury Golf Club? YES/NO

If yes, please give dates of membership.....

APPLICATION

I wish to become a member of Bigbury Golf Club and promise to abide by the Rules, Byelaws and Procedures of the Club.

Signed:.....Dated:.....

For Office use.

Membership Category Joining date

Membership Card No.

Payment Details: Cash / cheque / debit card / credit card

Amount paid £..... Date

Application Processed by Date:.....

NOTES