

MEMBERSHIP APPLICATION FORM

Title (Mr/Mrs/Miss) Surname.....

Christian Name/s.....

Address

.....Post Code

Date of Birth.....Telephone Number - Home.....

Mobile.....

Email address (please print clearly)

Occupation

Membership of other ClubsCurrent Handicap.....

If so, which Club will be your HOME Club for handicapping purposes.

..... EGU CDH number

I have no objection to my membership details being included on a computer list.

I confirm that I do not have any unspent convictions.

I wish to apply for membership of Alnmouth Golf Club Ltd.

SignedDate.....

Category – Full Playing/5 Day/Lifestyle/Town & Country/Country/Country Distant/Junior Under 9/Junior 10 - 13/Junior 14 - 15/Junior 16-17/ Intermediate 18,19,20/Student / 21- 29 years old/ Overseas / Summer Evening / Social. **Please circle appropriate category**

Proposer and Seconder

Members who wish to propose or second an applicant must comply with the following conditions –

1. They must be an adult playing member of at least 2 years standing.
2. They must have known the prospective member for at least 2 years.
3. They must make themselves responsible for introducing the new member to Club procedures, golf etiquette, the rules of golf and meeting the standards of Alnmouth Golf Club.

Proposer

I agree to comply with the requirements above.

SignedPrint Name.....

Seconder

I agree to comply with the requirements above.

SignedPrint Name.....

Applicants who do not have proposers or seconders will be interviewed by either the Club Manager or a Club Official prior to membership being confirmed.

FOR OFFICE USE ONLY

DATE APPLICATION RECEIVED.....APPROVED AT A MEETING ON.....

DATE OFFER LETTER SENT.....



ALNMOUTH GOLF CLUB
FOXTON HALL

Alnmouth Golf Club Ltd
Foxton Hall
Alnmouth
Northumberland
NE66 3BE
01665 830231

Email: secretary@alnmouthgolfclub.com