

# EDENDERRY GOLF CLUB

## APPLICATION FOR MEMBERSHIP – 2011

Name: .....

Address: .....

.....

Phone No: Home: ..... Mobile: .....

E Mail .....

Do you wish to be contacted by Email Yes/No

Date of Birth: .....

Date of Application: .....

Type of Membership: Please Circle

Full      5 Day      Country      Beginner      Junior  
If country membership, state name of Club which applicant is a member.

Have you been a member of any Golf Club in the last 10 years

Yes/No    If yes Name of Club .....

Have you ever held a GUI Handicap Yes/No

If yes last official Handicap .....

Have you been a member of a Golfing Society in the last 5    Yes/No

Have you ever held a Society Handicap.....    Yes/No

Last known Society Handicap: .....

Proposed by: ..... (Full member for 2 years)

Seconded by: .....(Committee Member)

Date Approved: .....