

## **APPLICATION FOR MEMBERSHIP**

## CATEGORY: COUNTRY: JUNIOR: STUDENT: SOCIAL

## (Delete as appropriate)

I wish to apply for the above category of membership of Langland Bay Golf Club. I understand that completion of this form does not in any way constitute acceptance on behalf of the Club and that it is for record purposes only. If any of the following personal details change I understand that it is my responsibility to advise you accordingly. I also agree to be bound by the Rules of the Club as amended from time to time. I confirm that these details may be held on your computer records for the sole use of Langland Bay Golf Club.

Signed	Date
Personal Details	Mr/Mrs/Miss/Ms/Other
FULL NAME	
ADDRESS	
POST CODE	
TELEPHONE	Home Business
E.MAIL ADDRESS	
OCCUPATION	
PRESENT CLUB &	z HANDICAP
DATE OF BIRTH	//19
SIGNATURE OF P	ROPOSER
NAMES OF PROPO	OSERS
RELATIONSHIP TO APPLICANT	
SECONDED BY (BOARD MEMBER)	
Club use only:	
Computer □ F	Board □ Notice board □ Advice □