

PORTPATRICK (DUNSKEY) GOLF CLUB

APPLICATION FOR MEMBERSHIP

(MR/MRS/MISS/other) _____

CONTACT DETAILS:

SURNAME : _____

TEL: (HOME) _____

FIRST NAME : _____

TEL: (WORK) _____

ADDRESS : _____

TEL: (MOBILE) _____

E-MAIL: _____

DATE OF BIRTH: _____

POSTCODE: _____

CURRENT HANDICAP: _____

DO YOU WISH DUNSKEY TO BE YOUR HOME CLUB? YES / NO

I HEREBY APPLY FOR MEMBERSHIP OF PORTPATRICK (DUNSKEY) GOLF CLUB AND AGREE TO ABIDE BY THE CONSTITUTION OF THE CLUB.

* FULL GENT * FULL LADY * INTERMEDIATE (18-26) * ASSOCIATE

* INTERMEDIATE ASSOCIATE (Member of another Wigtownshire club)

* SOCIAL * JUNIOR (Under 18 as at 1st March)

* JUNIOR ASSOCIATE (Member of another Wigtownshire Club)

* JUNIOR HIGH (Junior with h/cap of 24 or less wishing to play in Senior Comps)

* JUNIOR (5-8 YR OLDS) *SOCIAL PARTNER *DINVIN COURSE ONLY

(Please circle the above membership category as appropriate. Parental consent is necessary for Junior applications and forms must be signed by parent / guardian.)

Signature _____

Proposed By:
(Sign) _____

Signature of Parent/Guardian:

(Print) _____

Seconded By:
(Sign) _____

(Print) _____

Date of Application: _____

Date of Acceptance: _____