

Lisburn Golf Club MEMBERSHIP NOMINATION FORM

Section 1 - MEMBERSHIP CATEGORY	
Please tick membership category applied for :	
Ordinary Member (Male): Ordinary Associate	Member (Female) :
Five Day Member (Male): Country Member (Re	esides outside N.Ireland) (M&F):
Veteran Member (Returning members only) (Male): Non Playing Member	er (Male & Female) :
Under 25 Member (Male & Female): House Member (parts	ner of a current member) (M&F):
Junior(U18)/Juvenile(U15)/Cadet(U11) Member (M&F): Concession Member	er (Male & Female) :
All field	s marked * are compulsory. Form will be
O 4' O DEDOGNIAL DETAILO :	if not complete. Please use block capitals.
Title : *Surname :	
*Forenames :	
*Full Address :	
	*Post Code :
*Date of Birth :	*Gender: Male Female
Occupation:	(If Student, please advise University)
Are you related to a current or past member of Lisburn Golf Club?	Yes No
If yes, please provide a name & relationship details :	
Have you been a member of any other golf club in the past twelve months ?	Yes No
If yes, please advise your GUI / ILGU Number:	Handicap:
If retaining another Club membership, do you wish Lisburn to be your HOME club?	Yes No
Have you been a member of a Golf Club at any other time?	Yes No No
If yes, please provide Club name(s) and year(s) of membership:	
Section 3 - PROPOSER / SECONDER	
Proposer / Seconder:	
We, the undersigned, being authorised Members of Lisburn Golf Club, nomina	
membership and confirm the candidate to be known to both the Proposer and and proper person to be granted membership.	the Seconder and is considered a fit
and propor person to be granted membership.	
Proposed by (Print name): Signature: (The Proposer must be a Voting Member of the Club)	
How long known to Proposer and in what capacity (relative/business/socially)	:
Seconded by (Print name): Signature: (The seconder must also be a Voting Member of the Club)	
How long known to Seconder and in what capacity (relative/business/socially)	:
Attention is drawn to the fact that this application is the responsibility of the Proposer and Seconder are onus is on the Proposer in particular, but also on the Seconder, to ensure that the person nominated in Proposer and Seconder affirm this by giving all relevant information in the spaces provided and by significant this is so. Please note: non-voting members (Five Day, Veteran, Associates, Under 25, Juvenile etc) are	s of good character and reputation. The ning this document to satisfy Council that
membership Nominations at any time and in accordance with Rule 7(iv), Ordinary Members shall not have members unless they have been an Ordinary Member for more than three years.	

Section 4 - PERSONAL I	DE I AILS (Part B)	If no home or mobile phone or e-m	nail, please state this. Please use	DIOCK Capitals.
Applicants Full Name:				
**Home Tel.No :		**Mobile No :		
		any golf club ?		No
Have you ever been a	member or applied for m	embership at Lisburn G.C. be	efore ? Yes	No
If yes, please state dat	e and details:			
•		is any prosecution pending in erson ?		No
If yes, please provide b	orief details :			
** Please give parent / guardia	n details if applicant is U18)			
		All fields	s are compulsory. Form will be rejected	d if not complete.
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 $e\text{-}mail: \underline{info@lisburngolfclub.com}$ Personal details provided on Page 2 of this application form will remain confidential however if this application is progressed, the details on Page 1 must be posted on the noticeboard for approval by Club Members, in accordance with our Rules for Member admission.

Club Contact: Phone: 028 92 677216

Website: www.lisburngolfclub.com