



# Lisburn Golf Club

## MEMBERSHIP NOMINATION FORM

### Section 1 - MEMBERSHIP CATEGORY

Please tick the membership category you wish to apply for :

- |   |                          |  |                          |
|---|--------------------------|--|--------------------------|
| Ordinary Member (Male) :                            | <input type="checkbox"/> | Ordinary Associate Member (Female) :               | <input type="checkbox"/> |
| Five Day Member (Male) :                            | <input type="checkbox"/> | Country Member (Resides outside N.Ireland) (M/F) : | <input type="checkbox"/> |
| Veteran Member (Male) :                             | <input type="checkbox"/> | Non Playing Member (Male / Female) :               | <input type="checkbox"/> |
| Under 25 Member (Male / Female) :                   | <input type="checkbox"/> | House Member (partner of a current member) (M/F) : | <input type="checkbox"/> |
| Junior(U18)/Juvenile(U15)/Cadet(U11) Member (M/F) : | <input type="checkbox"/> | Concession Member (Male & Female) :                | <input type="checkbox"/> |

### Section 2 - PERSONAL DETAILS (Part A)

All fields marked \* are compulsory. Form may be rejected if not complete.  
Please use block capitals.

- Title : \_\_\_\_\_ \*Surname : \_\_\_\_\_
- \*Forenames : \_\_\_\_\_ (Please underline name known by)
- \*Full Address : \_\_\_\_\_
- \*Date of Birth : \_\_\_\_\_ \*Post Code : \_\_\_\_\_
- Gender : Male ☐ Female ☐
- Are you related to a current or past member of Lisburn Golf Club ? \_\_\_\_\_ Yes ☐ No ☐
- If yes, please provide their name & relationship details : \_\_\_\_\_
- Have you been a member of any other golf club in the past twelve months ? \_\_\_\_\_ Yes ☐ No ☐
- If yes, please advise the following: Golf Union No: \_\_\_\_\_ 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 (including Lisburn G.C) at any other time? \_\_\_\_\_ Yes ☐ 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, nominate the above candidate for membership and confirm the candidate to be known to both the Proposer and the Seconder and is considered a fit and proper person to be granted membership.

Proposed by: \_\_\_\_\_ Print Name: \_\_\_\_\_  
(The Proposer must be a Voting Member of the Club)

How long known to Proposer and in what capacity (relative/business/socially) : \_\_\_\_\_

Proposed by: \_\_\_\_\_ Print Name: \_\_\_\_\_  
(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 and as such, is not to be taken lightly. The onus is on the Proposer in particular, but also on the Seconder, to ensure that the person nominated is of good character and reputation. The Proposer and Seconder affirm this by giving all relevant information in the spaces provided and by signing this document.

**Please note: In accordance with Rule 7(iv), Ordinary Members shall not have the right to propose or second new members unless they have been an Ordinary Member for more than three years.**

**Non-voting members (Associates, Under 25, Juvenile etc) are NOT entitled to propose or second membership Nominations at any time.**

**Section 4 - PERSONAL DETAILS (Part B)**

All fields in this section are compulsory. Form will be rejected if not complete.  
If no home or mobile phone or e-mail, please state this. Please use block capitals.  
\*\* Please give parent / guardian details if applicant is U18)

Applicants Full Name: \_\_\_\_\_

\*\*Home Tel.No : \_\_\_\_\_ \*\*Mobile No : \_\_\_\_\_

\*\*Daytime No : \_\_\_\_\_ \*\*E-mail : \_\_\_\_\_

Have you resigned or ever been expelled from any golf club ? \_\_\_\_\_ Yes ☐ No ☐

If yes, please state Club(s) and reason : \_\_\_\_\_

Have you ever applied for membership at Lisburn G.C. before ? \_\_\_\_\_ Yes ☐ No ☐

If yes, please state date and details: \_\_\_\_\_

Have you ever been convicted of an offence or is any prosecution pending involving:

unruly behaviour, intimidation or injury to any person ? \_\_\_\_\_ Yes ☐ No ☐

If yes, please provide brief details : \_\_\_\_\_

**Section 5: General Data Protection Regulations (GDPR)**

The Club's Privacy Statement may be requested from the Club Office or may be viewed on the Club website.

All Membership applicants are advised of the following: The 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 Club Rules for Member admission.

If your membership application is successful, the Club is permitted to contact you to fulfill our obligations to you as a member and to provide the services to which you are entitled under our Rules. However, under GDPR we are required to obtain a positive confirmation of how we can contact you, if you want to receive any other relevant information and that should you ever leave the Club, we can retain your data should you subsequently wish to rejoin the Club.

You are therefore asked to complete the following questions below before submitting this form.

*Note: These questions are to confirm your preferences only and answers will in no way influence consideration of your membership application.*

I consent to the Club contacting me by the following means: (please tick the relevant box or boxes or leave blank if you so wish)

Email: ☐ Mobile: ☐ Phone: ☐ Text: ☐ Post: ☐

I consent to the Club contacting me regarding events and promotions at the Club.

Please tick to confirm: ☐

I consent to the Club retaining my personal data to use in case I wish to rejoin the Club at a later date.

Please tick to confirm: ☐

I consent to Team Captains contacting me in respect of Club Matches. (Playing members only)

Please tick to confirm: ☐

I confirm that I am over the age of 18 and have read, understood and agree with the way my / my child's data will be used by Lisburn G.C.: ☐

**Section 6 - APPLICANT'S DECLARATION**

All fields are compulsory. Form will be rejected if not complete.

I, the undersigned, declare the information given by me on this application form to be true and complete to the best of my knowledge and understand that, should the same prove false or misleading, my application shall be rejected with no communication or correspondence being entered into. I agree that completion of this form does not entitle me to any rights with regard to becoming a member of this Club in any category and it may be rejected at any time by the Council of the Club in its absolute discretion and without assigning any reason therefor.

I further declare that, should my application be successful, I shall make myself familiar with and comply with the Rules, Regulations and Bye-Laws of the Club and if a playing member, with the Rules and Etiquette of Golf.

I undertake to be of good behaviour and not to use profane or other offensive language.

*(The attention of Ordinary Member applicants is drawn to Bye-Law 1(b) which states: Effective from 1st April 2014, any Member newly elected to the Club will not be entitled to have his name placed on the timesheet during any competition timesheet draw.*

*Such member may however have his name placed on the timesheet at any time after the draw has been completed.*

*This restriction will remain in force for a period of two years from the date of election unless changed by an Order of Council.)*

Signature of Applicant : \_\_\_\_\_ (Parent / Guardian if candidate is U18)

Print Name : \_\_\_\_\_

Date : \_\_\_\_\_

**The Club Membership Year runs from 1st March to end of February.**

When fully completed, this form should be returned to the Club for the attention of:

The Honorary Secretary  
Lisburn Golf Club  
Blaris Lodge  
68 Eglantine Road  
Lisburn BT27 5RQ

For Administration use only:

Date received :	
Posted on Board :	
Interviewed :	
Appvd. by Council :	
Fees Paid :	

Club Contact : Phone : 028 92 677216

e-mail : [info@lisburngolfclub.com](mailto:info@lisburngolfclub.com)

Website: [www.lisburngolfclub.com](http://www.lisburngolfclub.com)