



Aboyne Golf Club



Established 1883

## Application for Membership

Date of Application: .....

Title: ..... First Name: ..... Surname: .....

Address: .....

Postcode: .....

Telephone numbers – Home: ..... Mobile: .....

E-Mail Address; .....

Date of Birth: (This is important for player records) .....

**I wish to join the membership of Aboyne Golf Club, and make this application subject to the Constitution and Rules of the Club.**

Signature: ..... Date: .....

**If you are, or have been a member of any other Golf Club please give details  
(Not applicable to Social membership applications)**

Club: ..... Dates: .....

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Handicap: (Proof of which will be required) ..... CDH No: .....

(If no current official handicap enter previous lowest handicap): .....

**Would you treat Aboyne as your 'Home Club' for handicap purposes?** .....

(This is for administration purposes only. You are entitled to 'hold' your handicap at any club where you are a member)

We the undersigned, believing the above named, who is personally known to each of us, to be a suitable candidate, recommend election as a member of Aboyne Golf Club.

Proposer: ..... Signature: .....

Seconder: ..... Signature: .....

**Note: THE CANDIDATE MUST BE PERSONALLY KNOWN TO BOTH PROPOSER AND SECONDER WHO MUST HAVE BEEN ORDINARY MEMBERS FOR A MINIMUM PERIOD OF TWO YEARS.**

In the event an applicant is unable to secure the signature of a proposer and seconder, please supply a letter of recommendation from a previous club.

**For Office use:**

Date Received: ..... Signed: .....