

## Grange Over Sands Golf Club - Membership Application Form

Please complete the form below and return to the Office at the club.  
All information will be held in strictest confidence.

Title Mr / Mrs / Miss / Ms / Other Full Name.....

D.O.B.     /     /

Address.....

.....

.....Postcode.....

Tel no Home..... Mobile.....

Email

Previous Golf Club (if applicable).....

Current Golf Club Handicap (if any) ..... CDH Number .....

I wish to be considered for the following membership category. (Please circle as appropriate)

**Full / Introductory / Intermediate / Flexi / Junior / Associate / Winter / Social**

Information regarding membership categories and prices are available on request or via the website [www.grangegolfclub.co.uk](http://www.grangegolfclub.co.uk). All membership categories run for a full 12 months or longer in certain circumstances. Payment by instalments is available on request for all playing membership categories and is at the discretion of the Management Committee. Please note that should the applicant leave part way through the subscription year the full balance remains due (as set out in the Club Rules & Byelaws.).

I acknowledge that by paying my subscription I agree to be bound by the Rules and Byelaws of the Club and the Benefits, Terms & Conditions of the relevant membership category. I agree to be a member of Grange Over Sands Golf Club Limited which is a company limited by guarantee whereby the liability of each member is limited to £1 (not applicable to Social members).

Signed..... Date.....  
(Parent/carers signature required if under 16 years old)

Please make all cheques payable to **Grange Over Sands Golf Club Limited** or contact the Office for information regarding other payment methods.

### For Office Use Only

Entered on Club V1	Date:	Share certificate issued	Date:	Welcome letter / pack supplied	Date:
Bill raised	Date:	Handicap system updated	Date:	Bag tag issued	Date:
Method of payment		Card Number			
Date posted to A/C	Date:				