



## **APPLICATION FOR MEMBERSHIP**

(Please complete in block capitals)

**I REQUEST THAT MY NAME BE CONSIDERED FOR MEMBERSHIP OF THE ABOVE CLUB**

Full Name (Mr/Mrs/Miss/Ms delete as applicable)	
Address	
Post Code	
Home Phone No.	
Mobile Phone No.	
Email Address	
Date of Birth	/ / Age:
Present Club	
Previous Club(s) (if applicable)	
Signature	

**Month of Joining:** .....**1<sup>st</sup>** ..... **20**.....

**Introduced by:** ..... (Name) (if applicable)

**Category of Membership required** .....

**Payment terms available**

**All Members will hold a non-transferable, non-tradable share in the Company.**

*Please return completed form to:-*

*The Business Manager*

*Market Rasen Golf Club Limited,*

*Legsby Road, Market Rasen, Lincolnshire, LN8 3DZ. Tel (01673) 842319*

## **Application for Membership**

- Membership of the Club shall be open on application to anyone without discrimination.
- Every candidate for Membership shall complete an Application Form prescribed by Captains' Committee and submit it to the Business Manager.
  - Applicants for Membership will be introduced to the Men's Captain, Ladies' Captain or Junior Organiser as appropriate, after which acceptance will be at the discretion of the Captains' Committee.
  - Male Applicants aged 55+ may elect to be a Member of the Seniors' section on approach to/from the Seniors' Captain/Secretary. You will be asked to complete a separate Application Form in order to be considered for Membership of this section.
- Membership of the Club is confirmed once the appropriate subscription has been paid and at this point a Members' Bar Card will be issued. Any Member withdrawing from Membership of the Club, for whatever reason, will forfeit the balance on their Bar Card.