



APPLICATION FOR MEMBERSHIP

I hereby apply for membership of Windyhill Golf Club and agree to conform to the Rules of the club.

Please tick category of membership

Ordinary	Weekday	Limited Play	Intermediate [Ages 26-30]	Youth [Ages 18-25]	Junior A [Ages 15-17]	Junior B [Ages 10-14]
		Social	CASC			

Name

Address

.....

Post Code Date of Birth

Home Tel No Mobile

E mail Address

Previous Club/ Hcp

Date Signature

Proposers Name

Signature