# crests

**DISS GOLF CLUB**

**Stuston Common**

**Diss**

**Norfolk**

**IP21 4AA**

**Secretary: 01379 641025**

# DISS GOLF CLUB

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# APPLICATION FOR MEMBERSHIP (2018)

**(TO BE COMPLETED IN BLOCK CAPITALS)**

***I WISH TO APPLY FOR FULL MEMBERSHIP OF DISS GOLF CLUB AND IF ACCEPTED I AGREE TO BE BOUND BY THE RULES AND CONDITIONS OF THE CLUB INCLUDING ALL BY-LAWS AND DECISIONS MADE BY THE MANAGEMENT COMMITTEE WITHIN THE RULES OF***

***THE CLUB DURING THE TERM OF MY MEMBERSHIP.***

APPLICANTS FULL NAME: ………………………………………………………………………………………..….

ADDRESS: ………………………………………………………….………………………………………………..….

……………………………………………………………………………………………………………………………..

POST CODE: ……………………………TELEPHONE No: …………………………………………………………

MOBILE / BUSINESS No: …………………….………………………………………………………………………..

E – MAIL ADDRESS: …………………………………………………………………………………………..………

I HAVE / HAVE NOT, PREVIOUSLY BEEN A MEMBER OF A GOLF CLUB.

NAME OF PREVIOUS CLUB: ………………………………..………HANDICAP: ………..……………………….

OCCUPATION: ……….……..…………………………………..……...DATE OF BIRTH: ………..……………….

…………………..……………………………..……………………………………………………………… ………….

***A CONFIRMATION OF A HANDICAP FROM A PREVIOUS CLUB MAY BE REQUIRED.***

***GREEN FEES MUST BE PAID UNTIL THE APPLICANT IS ACCEPTED AS A FULLY PAID UP MEMBER UNLESS PLAY IS AUTHORISED BY THE SECRETARY MANAGER IN ADVANCE.***

***NO REFUNDS OF ANY FEES OR SUBSCRIPTIONS WILL BE MADE IN ANY CIRCUMSTANCES.***

***SIGNATURE OF APPLICANT: …………..………………………………….DATE: …………..…………………..***

***Subs: Payment Method: Chq/Cash/DD/SO Banked on:***

***Joining Fee: Date: Actioned by:***