

MEMBER'S APPLICATION FORM

Date.....

Full Name (Block Letters)

Address

.....Postcode

Profession or Occupation

Name of Firm/Company

Position Held

Telephone No: Private Business

Email address

Type Of Membership Required (Ordinary, Country, Junior)

Age Date of BirthCurrent Handicap
(Please attach certificates)

Name (s) of Previous Club (s)

Please enter the names of any Members who know you:

If elected to Membership of the Club I agree to abide by the Rules & Bylaws of the Dumfries and County Golf Club.

Signature of Candidate

PROPOSER: I wish to propose the above Candidate for Membership whom I have known personally for a period of

Name **Signed**

SECONDER: I wish to second the above Candidate for Membership whom I have known personally for a period of

Name **Signed**

COMMITTEE MEMBER: **Signed**

When complete please enclose a payment of £80.60 being an initial instalment of 20% of the current entrance fee (except for applicants of Junior Membership) If Application Form refused for any reason this deposit will be returned to the applicant.

Date Received **Date Displayed on Notice Board**

Approved by the Committee