



Application for Membership & Form of Nomination

I wish to become a Member of the Leven Golfing Society and I hereby agree, if accepted, to be bound by all the rules of the Society (**BLOCK CAPITALS PLEASE**).

Mr/Mrs/Ms(delete as req'd) Surname:.....First Name:.....

Date of Birth:..... CDH No. (if known):.....

Address:.....

.....**Post Code:.....**

Telephone No (Home)..... (Mobile).....

E-mail Address

Occupation:.....

Name of present or past golf clubs:.....

Current Handicap **OR Last Handicap**

Which Club do you wish to be your home club

Category of Membership applied for: (Please tick as appropriate)

Full **Ladies Introductory Offer** **Country**

Senior **18-22 Y/O** **23-25 Y/O** **26-29 Y/O** **Juvenile (11-15)**

Junior (16-17) **Forces or Student** **Non-resident**

Applicant's Signature:.....Date:.....

Proposed by (Name in block capitals).....

Signature:.....

How long have you known the applicant personally?.....

Seconded by (Name in block capitals).....

Signature:.....

How long have you known the applicant personally?.....

NB: The Proposer and Secunder should have been members for at least one year and the Committee may request further information from them concerning the applicant. Membership category is determined by applicant's age at 1st January in the membership year.