THE WEST KILBRIDE GOLF CLUB 33-35 Fullerton Drive Seamill WEST KILBRIDE Ayrshire KA23 9HT

Tel: [01294] 823911 / *Fax*: [01294] 829573 *Email*: golf@westkilbridegolfclub.com

NOMINATION FOR MEMBERSHIP

Candidate's Name	(Mr, Mrs, Ms, Miss)
(Block Capi	
Address	
	Post Code
Date of Birth	Telephone
Occupation	E-mail
PROPOSER	SECONDER
(Block Capitals)	(Block Capitals)
Signature	Signature
Date of Joining Club	Date of Joining Club
Number of years acquainted with candidate:	Proposer years
	Seconder years

<u>Notes</u>

- 1) The Proposer and Seconder must know the candidate personally for <u>not less than 3 years</u> and also have been an Ordinary member of The West Kilbride Golf Club for <u>not less than 3 years</u>.
- 2) The Nomination is the responsibility of the Proposer and is not regarded as an application by the candidate for membership. <u>The Proposer is required to submit a letter in support</u> of the Nomination.
- 3) A Nomination Fee of £50.00 should be lodged with this Form and will be deducted from the Entrance Fee on admission. Nomination Fees are not required for Junior Nominations.
- 4) Candidates unable to provide a Proposer and/or Seconder should arrange for a Letter of Introduction from their previous Club Secretary and if this is not possible, a short interview will be arranged.

 \sim Why do you want to become a member of The West Kilbride Golf Club? \sim Have you previously been a member of another Golf Club? Yes / No \sim If you were previously, but are no longer, a member of a Golf Club, please give reason for leaving. \sim Have you ever been refused membership of another Golf Club? Yes / No \sim If Yes, please give reason. ~ Are you currently a member of another Golf Club? Yes / No \sim If Yes, please provide name(s) of Club(s). \sim What is your handicap? What was your previous handicap if now lapsed?

Failure to provide accurate information to any of the above questions may result in the application being rejected.