

ABERDOVEY GOLF CLUB

MEMBERSHIP APPLICATION FORM

Station Road Aberdovey Gwynedd, LL35 0RT

Membership Category:	•••••			
Surname:		Title:		
First Name/s:		Male/Female:		
Address:		Date of Birth:		
		Post Code:		
Email Address:				
Do you hold a current handicap? Yes/	'No	Н'сар:		
If Yes, please provide your CDH Number:				
Telephone:	Mobile:			
Emergency contact:	Phone:			
Proposer: * PLEASE PRINT	Seconder: *	PLEASE PRINT		
Sign:	Sign:			

*Proposer and Seconder should be two current Members of the Club, each of whom has been a Member of the Club for at least three years and each of whom is a Full, Life or Young Adult Member. They should be personally acquainted with the applicant but not related to the applicant and are responsible solely for the eligibility of the candidate to be a member of Aberdovey Golf Club

We use the information above to allow us to fulfil our contractual obligations to you as a member in accordance with our Club Rules. We share this information with our external and internal Data Processors who adhere to our Privacy Policy. A copy of the Club's Privacy Policy is available on request and can be viewed on the clubhouse notice board, but if you need any further information please write to the Data Controller at Aberdovey Golf Club, Station Road, Aberdovey LL35 ORT

We would also like to be able to correspond with you regarding our club's activities and in order for us to carry out this processing we require you to positively opt in by completing the boxes below.

"I am happy for you to communicate with me regarding additional club activities via the following means:"

Please fill in the information and **tick** the relevant box(es)

Post:	Address as above	Email: Address as above	
Telephone:	As above	Mobile: As above	

"I understand that if my application for membership is successful I will be bound by the Club Rules"

"I confirm that I am over the age of 16 and have read, understood and agree with the way my data will be used by Aberdovey Golf Club." If under the age of 16 a parent/guardian must sign the form on your behalf.

Signature: Date:

Should you leave the Club we would like to continue to hold your personal data so that we may contact you about future membership offers.

If you agree to us retaining your personal data for this purpose, please tick the box. \Box

