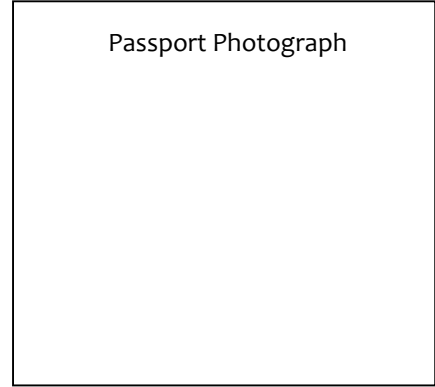


CARLOW GOLF CLUB APPLICATION FOR MEMBERSHIP

Ref: _____

Full Member 2020/2021



Membership Category Applied For: _____

Title: Mr/Mrs/Ms: _____

Surname: _____

Christian Name(s): _____

Address: _____

Date of Birth: ____/____/____

Phone:(H) _____ (W) _____ (Mobile) _____

Email: _____

Occupation: _____

Employer / School: _____

Present Golf Club: _____ Present Handicap : _____

Membership of other Golf Clubs: (Current or Past)

CLUB	CATEGORY	FROM	TO	SPORTING HONS/OFFICE HELD

Membership of other sporting/social clubs (Current or Past)

CLUB	CATEGORY	FROM	TO	SPORTING HONS/OFFICE HELD

Name(s) of near relations who are or have been member(s) of Carlow Golf Club, and dates of their membership

NAME	CATEGORY	FROM	TO	RELATIONSHIP

Have you applied for membership of any Golf Club previously? Yes/No _____

If yes, state name of Club(s): _____

I hereby apply for membership of Carlow Golf Club. I consent to attend an Interview Board if requested. Should my application for membership be successful, I undertake to make myself acquainted with and observe the Constitution and Rules and the Bye Laws of Carlow Golf Club and the Rules and Etiquette of the game of Golf.

Signature of Applicant: _____ Date: _____

THE PROPOSER AND SECONDER MUST BE FULL MEMBERS OF CARLOW GOLF CLUB

NOTE: A member of the Committee of Management, the Men’s Committee or the Ladies’ Committee shall not propose or second a candidate for election (Rule 11.2.1)

This form must be fully completed **and returned to the Hon. Secretary. Incomplete applications will not be accepted.**

To be completed by the Proposer:

How long have you known the candidate? Years: _____

Is the candidate (a) a relation Yes/No: _____

(b) a personal friend Yes/No: _____

(c) a business associate Yes/No: _____

I, the Proposer shall be responsible for ensuring that the candidate, if elected is made conversant with the Constitution and Rules and the Bye-Laws of Carlow Golf Club and the Rules and Etiquette of the Game of Golf.

I am, if requested, prepared to attend an Interview Board.

Name of Proposer: (Print) _____ **Date:** _____

Signature of Proposer: _____

Name of Seconder: (Print) _____ **Date:** _____

Signature of Seconder: _____

ALL APPLICANTS FOR MEMBERSHIP MUST BE PROPOSED AND SECONDED BY FULL MEMBERS, NONE OF WHOM ARE MEMBERS OF THE MANAGEMENT, MENS OR LADIES COMMITTEES.

FOR OFFICE USE ONLY

Completed form returned	Date
Processed by Committee of Management	Date
Posted on Notice Board	Date
Elected	Date
Applicant notified	Date

Entrance Fee:	Capital Levy:	Subscription:	Other Charges:
Cash:	P.O.	Cheque:	
Receipt No:	Issue Date:	Signed:	

Handicap Information

Are you currently a member of a Golf Club? Yes No

If **"Yes"** please give full details;

Name of Club: _____ Membership Category: _____

Current CONGU Handicap: _____ GolfNet Number: _____

An authorised copy of your current **detailed** handicap record from your club's competition and handicap software will be required.

Note: If you plan to be a Dual Member (In Ireland, a Member of more than one club must be handicapped at whichever club he plays most Qualifying Competitions - CONGU ® UHS Clause 8.2.).

If **"No"** please complete the following;

Have you previously been a member of a Golf Club? Yes No

If **"Yes"** please give full details;

Name/s of Club/s: _____ Membership Category/ies: _____

Initial Handicap allotted: _____ Lowest CONGU ® Handicap held: _____

(A copy of your last detailed handicap record will be required)

If **"No"**

Other Golfing experience - if any

Have you played Society Golf : Yes No _____

If "yes" give details and Handicap held – if any: _____

Have you played Pitch and Putt: Yes No

If "yes" give details and Handicap held – if any: _____

If **"No"**

Other Sporting experience – If any: _____

Achievements in the named sport/s: _____

Note: The Allotment of Handicaps at Carlow Golf Club is the responsibility of Handicap Committees, who will advise you of the procedure to obtain a handicap in accordance with Clause 16 of the CONGU ® UHS.