



Mundesley Golf Club Limited

Membership Application

Mr. / Mrs. / Ms. / Miss. *

Surname.....First Name..... D/O/B.....

Address.....

.....Post Code.....

Home Tel No..... Mobile No.....email.....

Occupation.....

Golf Details: (Past clubs / Handicap / Experience)

.....

.....CDH Number (if applicable).....

Membership Category: (please indicate with a Yes as required)

Full Membership..... 5 Day Membership..... 9 Hole Membership.....

Junior Membership..... Social Membership.....

2nd Club Membership..... Trial Membership.....

I request that you add my details to the database of members and hereby opt in / out* of receiving communication by email or post.

Signature.....

Date.....

*** Please select / delete as appropriate**