BEXLEYHEATH GOLF CLUB

Club House, Mount Drive Mount Road, Bexleyheath, Kent DA6 8JS General Manager: Mr G.V Tait - 0208 303 6951 - Email: bexleyheathgolf@gmail.com

APPLICATION FOR MEMBERSHIP

Thank you for your enquiry about joining Bexleyheath Golf Club. Please fill in this form and return it to the Manager at the above address.

Surname:				Fc	orname:		
Private Ac		ETTERS PL	EASE.				
				Po	ost Code		
Telephone No:				Mobile No:			
E-mail address:				Date of Birth:			
Membership required: Full/Weekday/Twighlight/Junior							
CDH ID				_ H	ANDICAP		
Name of Previous Club							
Were you recommended by London Golf Performance Academy YES/NO							
I am happy Post	for you to co	mmunicate w Email	ith me via the	e following means	s please tick the relev	vant box(es). Mobile	
I am happy for my name and contact details to be displayed on the following club sites; Please tick the relevant boxes							
How-Did-I-do □			Club Site		Club V1	Club V1 Hub	
Please Note: other members may only view your name & contact details on registration to one or all of the above sites. You will need to 'opt-In' to the selected field. You may, at anytime, change/update your Personal Data Restrictions							
Opt- In		Opt-Out					
I undertake, if elected a Member of the Club, to abide by the rules and Bye-Laws of the Club.							
I understand that I must notify the Manager in writing, not later than the day before subscriptions are due for renewal in any year, of my intention to resign or transfer the member for which I now apply. I agree to commit to a full year (12 months) subscription unless joining mid way through he membership year of which I will be expected to remain a member and pay fees (pro rata) until the next renewal date. I understand that should I resign prior to complete the agreed term, Bexleyheath Golf Club may refuse membership in the future. I also understand there is one year probationary period.							
Date:			Signature	of Candidate	:		