



CASTLE EDEN GOLF CLUB
MEMBERSHIP APPLICATION FORM (Effective 2021)

I hereby apply for membership of CASTLE EDEN Golf Club:

Please use CAPITALS:

Surname: _____ Forename(s): _____

Address: _____

_____ Post Code: _____

Telephone No: _____ Mobile: _____

Email address: _____

Date of Birth: _____ Handicap _____ (Current/Lapsed) CDH No: _____

Emergency Contact Name: _____ Contact Number _____

Category of membership applied for:

MEMBERSHIP TYPE	COST	Joining Fee	Total	PLEASE TICK
A1 FULL PLAYING MEMBER	£700.00*	£500.00	£1180.00	
A6 STUDENT MEMBER	£350.00*	£500.00	£840.00	
A5 BRIDGING (AGE 19 – 21)	£350.00*	£500.00	£840.00	
J1 JUNIOR age 6-10	£20.00*			
J2 JUNIOR age 11-12	£30.00*			
J3 JUNIOR age 13-14	£50.00*			
J4 JUNIOR age 15-16	£80.00*			
J5 JUNIOR age 17-18	£120.00*			
J6 Practice Ground Member	£0.00			
SOCIAL	£40.00			

*Affiliation fees are payable to England Golf & Durham County Golf Union. Prices correct at time of application & may be increased on an annual basis.

I have previously been a member of the following clubs (last ten years):

Club: _____ Dates: _____

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By submitting this application for membership, I acknowledge that, subject to it being successful, I agree to and understand the following:

1. Castle Eden Golf Club has my authority to use the above personal information solely for the purposes of administration of the activities and effective management of the golf club in accordance with the General Data Protection Regulation (GDPR). I have had the opportunity to read the club's GDPR policy and I am aware that I may revoke this authority at any time.
2. My membership fees are to be paid by the date of commencement of my membership and thereafter upon demand from the club and in any event no later than the date of annual renewal (unless previously arranged with the Committee). All fees are for 1 year's membership and if you chose to pay monthly, you are therefore liable for the full year's subscription. Should you stop payment, without reference to the management committee you will be asked to pay the remaining balance on demand. I have been made aware of the options for payment available to me and have agreed to pay as follows (tick as appropriate):
3. Castle Eden Golf Club operates within the framework of its constitution and policy documents produced thereunder. My rights and obligations in relation to the club are set out in these documents which I have had the opportunity to read.
4. Resignation of my membership must be in writing, (may be email) and submitted to the club secretary. I will remain liable for any outstanding subscription fees. There will be no refund of subscriptions for resigning members.
5. Post resignation, any application to re-join the club must be made in writing and submitted to the secretary for consideration by the committee.
6. The management committee has the right to accept or refuse any application for membership and may at its discretion place any condition or restriction on any membership granted.
7. The management committee retains the right to suspend or terminate my membership at any time if I fail to fulfil my obligations under the terms of the constitution, the rules of the club or the normal standards of the game of golf. Any such suspension or termination will be in accordance with the club constitution and the rules made thereunder.

Signature of applicant: _____ Date: _____

Proposer Signature: _____ Print: _____

Seconder Signature: _____ Print: _____

General Data Protection Consent

I agree that the club may hold information the information I have provided	yes	no
I agree to receive e-mails directly from Castle Eden Golf Club	yes	no
I understand my data will not be shared with any 3 rd party organisations unless it is related to my membership and participation in in Golf e.g. England Golf	yes	no