

APPLICATION FOR MEMBERSHIP - 2020-21

Title: Forenames:	Family Name:
Address:	
	Postcode:
Telephone numbers – Home:	Mobile:
E-Mail Address(es):	
E-Mail Address (if Parent / Guardian)	:
Date of Birth:	(This is important for player records)
-	of Aboyne Golf Club and make this application subject to institution and Rules of the Club.
I also agree to my e-mai	I address being added to the Club's mailing list. Please Tick
Signature:	Date:
	ategory below. Please note an additional compulsory £30 bar levy w. 'Juniors' and 'Overseas' members are exempt of this levy. The .50 Scottish Golf (SG) Affiliation Fee.
Category (Inclusive of Scottish Golf Affiliation F	Cost Tick

Full Membership (from age 30) £540 Age 29 £463 Age 28 £394 Age 27 £325 Age 26 £256 Young Adult (Age 18 – 25) £187 Junior (Age 16 to 17) £135 Junior (Age 12 to 15) £75 Junior (Age Under 12) £30 Twilight Member – Play after 2.30PM Mon -Fri only £300 'Play More Golf' Flexible Membership £280 'Country' Member – permanent UK resident outwith 35 miles from clubhouse £310 Aged over 75. 9-hole 5-days. Mon-Fri only with hours restrictions £215 'Overseas' member – permanent resident outside UK. Limit 10 rounds/year. £130 Family Membership - available for Ordinary/Full Members with 2 or more Junior Members 10% off in the family). 10% reduction will be applied to the total family fees. Non-Playing Social Member` £25

If you are, or have been a member of any other Golf Club please give details (Not applicable to Social Member applications) **Club**: ______ To _____ To _____ Handicap: (Proof of which will be required) _____ CDH No (if known): _____ If you do not have a current official handicap, please provide previous lowest handicap: Will you treat Aboyne as your 'Home Club' for handicap purposes? Yes / No (This is for administration purposes only. You are entitled to 'hold' your handicap at any club where you are a member) **RETURN THIS COMPLETED FORM:** Scan and Email back to pro@aboynegolfclub.co.uk Deliver by hand or post to: Membership, Aboyne Golf Club, Golf Road, Formaston Park, Aboyne, **AB34 5HP** For Office use: Date application received: ______ By: ______ Date Accepted/Declined: _____ Date placed on waiting list: ______ By: _____ Invoice Number: Date Raised: Date subscription fees received: _____ Membership number allocated: _____ Date information pack sent: ____ Form updated 01May20