

# WETHERBY GOLF CLUB



## MEMBERSHIP APPLICATION FORM

Title:	First Name:	Surname:	D.O.B.
Email:		Home Phone:	Mobile Phone:
Address:			
Gender:			Postcode:

### **Type of Membership (Please tick)**

Full (7 Day)	6 Day	Associate (Ages 18 to 39)	Student (FTE)	Social
Academy	Junior (separate form)			

### **Your Golf**

Details of present/previous golf clubs and handicaps given:
Current CONGU handicap if applicable: _____ CDH number: (if known) _____

We use this information to allow us to fulfil our contractual obligations to you as a Member in accordance with our Club's articles. We share this information with our external and internal Data Processors who adhere to our privacy policy.

We would also like to be able to correspond with you regarding our Club's activities and in order for us to carry out this processing we require you to positively opt in by completing the boxes below.

'I am happy for you to communicate with me via the following means' Please **tick** the relevant box(es)

Post	Email	Telephone - Home	Work	Mobile	Push Notification	
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We have attached a copy of our Club's Privacy policy to this application form for you to be able to view but if you need any further information please write to the Data controller, Kevin Fretwell, at Wetherby Golf Club, Linton Lane, Wetherby, Leeds, LS22 4JF

'I understand that should my membership application be successful I will be bound by the Club's articles.

Should you leave the Club we would like to continue to hold your personal data so that we may contact you with details about future membership offers. If you agree to us retaining your personal data for this purpose please tick the box.

**Please return completed form by email to [manager@wetherbygolfclub.co.uk](mailto:manager@wetherbygolfclub.co.uk)  
or post to General Manager, Wetherby Golf Club, Linton Lane, Wetherby, Leeds, LS22 4JF**

For Office use only:

Date received	Date of induction	Date billed	Date paid	Application completed
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**Proposer**

Name

Signature

Comments to support the application:-

**Secunder**

Name

Signature

Comments to support the application:-