**EREWASH VALLEY GOLF CLUB LIMITED**

Golf Club Road, Stanton by Dale, Ilkeston DE7 4QR

Telephone: 0115 932 3258 (option 5)

Email: golfadmin@erewashvalley.co.uk

**MEMBERSHIP APPLICATION FORM**

**NAME:** *Mr/Mrs/Miss/Ms/Dr*

**CATEGORY OF MEMBERSHIP:**

|  |
| --- |
| **PERSONAL DETAILS** |
| Address: |
| Home Tel: | Mobile: |
| Email: |
| Date of Birth: | Occupation: |
| **GOLFING DETAILS** |
| Are you new to golf, returning to the sport after a break, or a regular player? |
| Have you previously been a member at a golf club? If so, where and when? |
| Have you ever had an official CONGU handicap? If yes, what was it and how long ago? |
| What is/was your CDH number or England Golf number (visible on an old handicap certificate or HowDidiDo)? |
| If you have not previously held an official handicap, have you had an unofficial handicap with a Golf Society? |
| Is there any other information about you or your golf that might influence your golf handicap? |
| How did you hear about EVGC? |  |
| **CLUB INFORMATION** |
| Name & Signature of EVGC Member – Proposer: |
| Name & Signature of EVGC Member - Seconder: |
| **Declaration by Applicant** |
| I fully understand that before my application can be dealt with by the Committee, I may be required to attend a Captain’s Welcome Induction. Due to the limited number of vacancies, it may not be possible for all applicants to be elected to Member.I also hereby agree, if elected to Membership of the Club, to be bound by the conditions of the Articles of Association and the Rules of the Club. I promise to observe the recognised standard of etiquette both on the Course and in the Clubhouse. |
| **Signed:** | **Date:** |
| ***Office Use Only*** |
| *Date Received:* | *Induction Date:* |
| *Date Entered on System:* | *Membership ID:* |