



## APPLICATION FOR MEMBERSHIP

### **CATEGORY: MALE/FEMALE FULL PLAYING**

*(Delete as appropriate)*

I wish to apply for the above category of membership of Langland Bay Golf Club. I understand that completion of this form does not in any way constitute acceptance on behalf of the Club and that it is for record purposes only. If any of the following personal details change I understand that it is my responsibility to advise you accordingly. I also agree to be bound by the Rules of the Club as amended from time to time. I confirm that these details may be held on your computer records for the sole use of Langland Bay Golf Club.

Signed..... Date.....

**Personal Details**                      **Mr/Mrs/Miss/Ms/Other**.....

**FULL NAME** .....

**ADDRESS** .....  
.....

**POST CODE** .....

**TELEPHONE**      Home.....                      Business .....

**e.mail ADDRESS** .....

**OCCUPATION** .....

**PRESENT CLUB & HANDICAP** .....

**DATE OF BIRTH**                      .../...../19....

**SIGNATURE OF PROPOSER** .....

**SECOND PROPOSER** .....

**NAMES OF PROPOSERS** .....  
.....

**RELATIONSHIP TO APPLICANT** .....

**SECONDED BY (BOARD MEMBER)**.....

Club use only:			
Computer <input type="checkbox"/>	Board <input type="checkbox"/>	Notice board <input type="checkbox"/>	Advice <input type="checkbox"/>