

THE EDZELL GOLF CLUB

EDZELL, ANGUS, DD9 7TF

MEMBERSHIP FORM

Full Name (Block Capitals).....

Address.....

Address Postcode

Telephone Number Mobile Number

Occupation..... Date of Birth.....

Email address

Class of Membership desired.....

(i.e. Ordinary, Associate, Country, West Water, Non-Playing)

Note. - Country membership is restricted to those whose main residence is 60 miles from the Clubhouse.

Present or Previous Club.....

Present Handicap.....

I declare that the above particulars are correct.

Date.....Signature of Nominee

By signing this form you are giving the Club consent to hold the above data and contact you regarding club information and services. More information on the Club privacy policy is available on the website.

This form when completed should be returned to the Club Secretary.