



**ELSHAM GOLF CLUB**  
**APPLICATION FOR MEMBERSHIP**

FULL NAME(s) IN BLOCK CAPITALS  
STATING MR/MRS/MISS

\_\_\_\_\_

ADDRESS + POSTCODE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE NO

Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

EMAIL ADDRESS

\_\_\_\_\_

OCCUPATION

\_\_\_\_\_

DATE OF BIRTH

day \_\_\_\_\_ month \_\_\_\_\_ year \_\_\_\_\_

TYPE OF MEMBERSHIP REQUIRED

FULL/JOINT/FAMILY/COUNTRY/JUNIOR/HOUSE \_\_\_\_\_

DETAILS OF PRESENT OR PREVIOUS )  
MEMBERSHIP OF GOLF CLUBS TO )  
WHICH THE SECRETARY MAY REFER )

\_\_\_\_\_

\_\_\_\_\_

HANDICAP (IF ANY) \_\_\_\_\_ CDH No \_\_\_\_\_ Is Elsham to be your home club Yes or No

SIGNATURE OF PROPOSER (if any) \_\_\_\_\_ NAME of proposer (print) \_\_\_\_\_

**Membership Application:**

*"I hereby apply to become a member of Elsham Golf Club in the category selected above. I understand that details of my application, including my name and address will be published on the Club Notice Board prior to my acceptance."*

**I AGREE TO BE BOUND BY THE RULES OF ELSHAM GOLF CLUB**

I am content for my telephone number to be released to other members and officials of the Club:

Yes  No

I am content to receive information, newsletters, promotions and offers from Elsham Golf Club:

Yes  No

Where did you hear about membership vacancies at Elsham Golf Club? \_\_\_\_\_

SIGNED \_\_\_\_\_ DATE OF APPLICATION day \_\_\_\_\_ month \_\_\_\_\_ year \_\_\_\_\_

OFFICE USE ONLY

Entered on V1	Payment method	Green Card Issued	Welcome Pack Issued
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