Powfoot Golf Club

Application for Membership

Surname of Applicant:					Salutation (Mr, Mrs, Miss, Ms, etc)	
Full Christian Names:						
Postal Address: (including Post Code)						
If former member Please tick:	If full time st Please tick:	tudent		Main reside more from I	ence 50 road miles or Powfoot	Yes/No
If resident 50 road miles miles of the course:	or more from Powfoc	ot, is a caravai	n or temporary re	sidence mai	ntained within 50 road	Yes/No
Membership applied for appropriate)	(delete as Ordinary	Country	Second Cl	ub	Junior	Student
My last handicap at I have never had a handi				(SSS) in 20 was _	/
CDH No:						
Also a member of Golf Club		Go	lf Club. My Home	Club will be	·	
I hereby apply for admiss Constitution and Rules o				-	•	e
Signature of Applicant					Date	
Signature of Member Proposing Applicant				Name (Block Capitals)		
Signature of Member Seconding Applicant				Name (Block Capitals)		
PLEASE NOTE. A NON RE APPLICATION FORM. (This					MPLETED	
PERSONAL INFORMATIO	N AND CONTACT DETA	<u>AILS</u>				
Date of Birth:			Email:			
Home Tel No:	N	Mobile Tel No:				
	THE F	OLLOWING IS	S JUST FOR OFFICE	USE		
Date Entered on ClubV1			Date Entered on Scottish Golf/Dot Golf			