



ELTON FURZE

MEMBERSHIP APPLICATION FORM

Membership year runs from 1st May to 30th April

| | |
|-------|---|
| _____ | PLEASE ATTACH PASSPORT PHOTO <i>(Print full name on reverse).</i> |
| _____ | |
| _____ | |

Date of application

Title First name Surname

Address.....

Postcode Email Address.....

Tel (home) (work)(mobile).....

Date of birth/...../..... Company Name.....

TYPE OF MEMBERSHIP APPLIED FOR

Previous / present golf club Previous / present Handicap

CDH ID Elton Furze to be your Home / Away club

NB. Applicants without proof of a Handicap may be required to take at least one lesson with the Golf Pro, Matthew Rea to assess their standard before being offered Membership which will be charged for.

I wish to apply for membership of Elton Furze Golf Club and agree to abide by the Club Rules, and any amendments thereof, if my application is successful. I also agree that if for any reason I cannot continue to benefit from the membership at Elton Furze Golf Club under no circumstances will I be entitled to a refund for the subscription. In such circumstances if I am paying the subscription by direct debit I will remain liable for the remaining payments in full.

Signature of applicant(must be completed).

The Owners reserve the right to refuse Membership to Elton Furze Golf Club

OFFICE USE ONLY

Membership No: Membership Card No: Start date : / /

Subs Payment: D/D / Cheque / Cash / BACS Joining Fee: Cheque / Cash / BACS _____

Database Introduction _____

Introduced by: _____