

Membership Application Form

Gurrane, Mitchelstown, Co Cork
 Tel No +353 (0)25 24072
 Fax +353(0)25 86631

Email: info@mitchelstown-golf.com

Applicants must Complete All Sections of This Form

Section 6

Valid applications must be accompanied by a Proposer and Seconder.
The Proposer and Seconder must:

1. Be a full Member of Mitchelstown Golf Club for the previous 3 years.
2. Must Know the applicant
3. Play a round of golf with the applicant and return a signed 18 hole score card if the Applicant is seeking a Playing Handicap for the first time.

Proposer: (Block Letters) _____
 Signature _____

Seconder: (Block Letters) _____
 Signature _____

Section 7

Declaration

I agree to abide by the rules of Golf at all times. I further agree and undertake to comply with all the rules of the club, to abide strictly to all the Clubs Bye-laws and Constitution if accepted as a member. I also agree and undertake to abide by all committee directives. I acknowledge the right of the Committee to make whatever decisions that are in the best interest of the club.

Applicants Signature _____
 Date Of Application _____

Office Use Only

Date Rec'd _____
 Date to Notice Board _____
 Payment Rec _____
 Management Meeting _____

App Rej Def

Mem. Comit _____

Section 1

First Name : _____
 Middle Name: _____
 Surname : _____
 Address: _____

Tel No: _____
 Email: _____
 Date Of Birth: (Optional) _____

Section 2

Indicate Membership Category applying for

Full	<input type="checkbox"/>	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Hus/Wife	<input type="checkbox"/>	Overseas	<input type="checkbox"/>	Pavilion	<input type="checkbox"/>
Student	<input type="checkbox"/>	Junior	<input type="checkbox"/>	Juvenile	<input type="checkbox"/>

Note Country Membership not available at present.

All applications must be accompanied by the appropriate entrance fee and subscription.

Notes

1. Student must be accompanied by letter from 3rd level College /University.
2. Junior & Junior must indicate date of Birth
3. Overseas must provide evidence of residence outside of Ireland

Section 3

Details of other Golf Club (s).

Are you at present, or were you ever a member of another golf club? Yes/No

If yes please state the name(s) of the Golf Club(s)

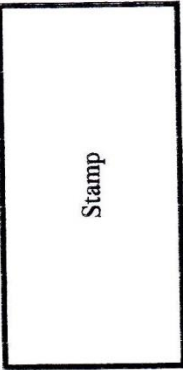
- 1. Club _____ year _____ to _____
- 2. Club _____ year _____ to _____
- 3. Club _____ year _____ to _____

Lowest playing h/cap _____ Present playing h/cap _____

Has your handicap ever been suspended Yes/ No

Have you ever been asked to resign your membership of any of your present /previous clubs Yes/ No

The Official stamp of Your previous Golf Club must be printed in the Box provided



Stamp

Section 5

Pitch & Putt Activity

Are you at present, or were you ever a member of a Pitch & Putt Club Yes/No

If yes please state names of the Pitch & Putt Club

- 1. Club _____ year _____ to _____
- 2. Club _____ year _____ to _____
- 3. Club _____ year _____ to _____

Lowest playing h/cap _____ Present playing h/cap _____

Have you ever been asked to resign your membership of a Pitch & Putt Club Yes/ No

Section 4

Society Golf Activity

Are you at present, or were you ever a member of a golf society Yes/No

If yes please state names of the Society

- 1. Society _____ year _____ to _____
- 2. Society _____ year _____ to _____
- 3. Society _____ year _____ to _____

Lowest playing h/cap _____ Present playing h/cap _____

Have you ever been asked to resign your membership of a Golf Society Yes/ No

A Handicap Certificate must Accompany this form if the applicant is, or has been, a member of another Club