

APPLICATION FOR MEMBERSHIP OF BURHILL GOLF CLUB

To the Club Committee

Full Name:

Address:
.....
.....**Post Code**.....

Home Tel:

Business Tel:

E-mail address:

Profession/Occupation

Date of Birth

Type of Membership

Previous Golf Club(s)

Letters of Reference may be required from your previous Club(s) to support your application

Current or latest Home Club**Playing handicap**.....

Will Burhill be your Home Club?**YES/NO**

If YES a copy of your Handicap Record will be required

If NO a copy of your Handicap Certificate will be required

Company Name and Address
.....
.....**Post Code**

I agree to accept election subject to the Constitution and Rules of Burhill Golf Club. Should my application be unsuccessful for any reason, I understand that the Club's decision is final and that no correspondence may be entered into regarding the decision.

Signature of Candidate**Date**

To be completed by the Proposer and Seconder if appropriate:

We the undersigned, both being members of Burhill Golf Club, wish to propose the above mentioned candidate for membership. We have read the Notes overleaf and attach letters from each of us stating how long we have known the candidate and giving our reasons for believing that he/she would be suitable for membership, both socially and as a golfer.

Proposer:**Signature**

Seconder:**Signature**

Allocated Membership No.