

ENVILLE GOLF CLUB
APPLICATION FOR MEMBERSHIP

SURNAME..... CHRISTIAN NAMES.....

ADDRESS..... OCCUPATION.....

..... DATE OF BIRTH.....

..... TEL Nos. HOME.....

POST CODE WORK

MOBILE

PREVIOUS CLUBS

..... DATES OF MEMBERSHIP

.....

PRESENT CLUB **DATE OF JOINING**

HANDICAP.....

GOLFING EXPERIENCE

.....

SIGNATURE OF APPLICANT **DATE**

The application must be supported by two full playing members of Enville Golf Club, who:

- (1) Must have been playing members of the club for two years
- (2) Must not be sponsoring more than one other applicant on the waiting list.

Sponsor No 1 NAME IN BLOCK LETTERS

SIGNATURE.....

Sponsor No 2 NAME IN BLOCK LETTERS

SIGNATURE