**Prestwick St Cuthbert Golf Club**

**Membership application form**

This form should be submitted to the club office and membership will begin on payment of the appropriate fees.

Full Name

Address

e-mail address

Date of birth

Occupation

Membership category applied for

Current/Previous Golf Club

Is St Cuthbert to be your home club?

Current Handicap

CDH number

**Nomination for Membership by existing members**

We, the undersigned members, wish to nominate the above-named person for membership of Prestwick St Cuthbert Golf club. In doing so we consider the applicant to be of good character and know of no reason why he/she should not be accepted as a member.

Proposed by (sign and print)

Seconded by (sign and print)

Signed by a Council Member (sign and print)

**Any other information**

If there is any other information you think we should know, please state in the box below.

If I am accepted as a member of Prestwick St Cuthbert Golf Club I agree to conform to the rules and bye-laws of the club throughout my membership.