

Receipt

MEMBER APPLICATION FORM

*Please write clearly. All relevant sections must be completed, or the application may be invalid.*

**SECTION 1: PERSONAL DETAILS**

**Applicant’s Full Name**

Address Postcode

Home Tel **Mobile**

**Email** **DoB:**

***Consent Section for Junior (U18) Applications:***

*Parent/Carer Email Mobile*

*Parent/Carer Print Name*

*Parent/Carer Consent Signature*

*I have the authority and consent to the above-named Junior joining Airdrie Golf Club*

**SECTION 2, OFFICIAL**

*Office Use*

*Rule:*

*Extras:*

**ANNUAL SUBSCRIPTION** **£**

Other payments (Locker, Trolley Store etc.) £

\_\_\_\_\_\_\_\_\_\_\_

**Total to pay** **£** \_\_\_\_\_\_\_\_\_\_\_

By completing your membership form, you are agreeing to comply with our Privacy Policy, which governs how we manage, store and process your data. Your details will only be used by Airdrie Golf Club to assist in the management of the club. You can withdraw your consent at any time. If you withdraw your consent, we may not be able to provide you with all the services of the club.

By signing, you agree to follow the Club’s Code of Conduct.

**Applicant Signature** **Date**

**SECTION 3: GOLF INFORMATION**

* Do you have a CDH Number? **YES/NO**\* [*\*delete as applicable*]

If **YES**, write your 10-digit CDH Number here:

Current Handicap Index:

* Have you been a member of another club in the last 5 years? **YES/NO**\*

If **YES** which Club[s]?

Which Club will be your Home Club for handicap purposes?

*Please be patient as your application may take a few days to process*