For Club Use

Received ……

Approved…….

Processed……

GRANTOWN-ON-SPEY GOLF CLUB
ESTABLISHED 1890

Grantown-On-Spey Golf Club
Golf Course Road
Grantown-On-Spey
Morayshire PH26 3HY
Tel: 01479 872079
Fax: 01479 873725

APPLICATION FOR MEMBERSHIP

Please complete in Block Letters

Mr/Mrs/Miss *……. Christian Names ……..

Surname ……..

Address:	**Home**	**Holiday Home (if applicable)**
Post Code		
Tel. Numbers		
Business Tel. No.		
Date of Birth		

Golf Correspondence to be sent to Home/Holiday Home *

	Dates	
Previous Clubs	**From**	**To**
Present Clubs		

Current Handicap…….…… **Please attach certificate**

If accepted for membership, which Club will you consider your home club for handicap purposes –

Grantown-On-Spey * or……...

I wish to make application for membership of Grantown-On-Spey Golf Club as a Full Playing Member/Reduced Member/Junior Member/Non Playing Member *. If admitted I agree to abide by the Rules and Bye-laws of the Club.

Signature…….. Date……..……

Proposed by (Signature)……. Print Name……..……

Proposed by (Signature)……. Print Name…….……..…

* Please Delete as appropriate

WHEN COMPLETED THIS FORM SHOULD BE PLACED IN AN ENVELOPE & ADDRESSED TO THE SECRETARY.