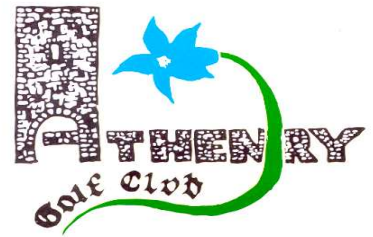


ATHENRY GOLF CLUB

PALMERSTOWN,
ORANMORE,
CO. GALWAY.

Tel. Office: 091-794466 Fax: 091 -794971
Pro Shop: 091-790599 E-Mail: athenrygc@eircom.net

Website: www.athenrygolfclub.net



APPLICATION FOR MEMBERSHIP

CATEGORY OF MEMBERSHIP (PLEASE TICK)

JUNIOR

STUDENT

DATE OF BIRTH

____/____/____

FULL NAME: _____

(Please print)

ADDRESS: _____

TELEPHONE NO: _____

E-MAIL ADDRESS: _____

SIGNATURE: _____ DATE: _____

PROPOSED BY: _____

SECONDED BY: (1) _____

(Two seconders required)

(2) _____

PARENTS CLUB: _____

APPLICANT'S PREVIOUS CLUB: _____ H'CAP: _____

DATE REGISTERED ____/____/____ SIGNED (Hon. Sec.) _____

WHY I WOULD LIKE TO JOIN ATHENRY GOLF CLUB: (Must be written by applicant).