



MEMBERSHIP CATEGORY

FULL MEMBER	<input type="checkbox"/>
COUNTRY	<input type="checkbox"/>
OVERSEAS	<input type="checkbox"/>
BEGINNER	<input type="checkbox"/>
STUDENT	<input type="checkbox"/>
PAVILION	<input type="checkbox"/>

ADULT MEMBERSHIP APPLICATION FORM

NAME:

DATE OF BIRTH:

ADDRESS:

MOBILE NUMBER:

EMAIL ADDRESS:

PREVIOUS CLUB: PREVIOUS HANDICAP:

PROPOSER NAME: SIGNATURE:

SECONDER NAME: SIGNATURE:

DECLARATION

I agree to be bound by the rules as set out by the Management Committee of Athenry Golf Club, the privacy policy of Athenry Golf Club and the constitution of Athenry Golf Club.

APPLICANT SIGNATURE: DATE:

NOTES

- Each candidate for election **MUST** be proposed by one voting Member of the appropriate Club and seconded by one voting Members of such Club.
- A member proposing or seconding a candidate for Membership **MUST** be a voting Member of at least 3 years standing.
- A letter from proposer or seconder **MUST** accompany Application stating their personal knowledge of the proposed candidate.

FOR CLUB USE

DATE RECEIVED: DATE NOTIFIED:

DATE APPROVED: DATE POSTED:

HON SEC. SIGNATURE: