

# Maverston Golf Course

## Membership Form

Membership Type: \_\_\_\_\_

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Middle Name(s): \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

House Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you a member of another club? \_\_\_\_\_

Will Maverston Golf Club be your home or away club? \_\_\_\_\_

Do you have a current Handicap? \_\_\_\_\_

Do you have a CDH Number? \_\_\_\_\_

You hereby agree to follow the club constitution and bye laws of Maverston Golf Club and uphold the spirit of the game at all times.

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

For office use only

Membership Accepted: \_\_\_\_\_

Payment Terms: \_\_\_\_\_

Membership Number: \_\_\_\_\_

Entered on: \_\_\_\_\_