

**TEHIDY PARK GOLF CLUB
CAMBORNE, CORNWALL, TR14 0HH**

MEMBERSHIP APPLICATION FORM

Full Name (Block Capitals) (Mr / Mrs / Miss / Other).....

Address

..... Post Code

Telephone (H) (W) E-Mail.....

Occupation Present Golf Club

Have you been a Member of a Golf Club (Y / N) Club.....

Current Handicap Date of Birth

I wish to apply forMembership of the Club. I understand that for some categories I will be required to attend an interview and my name may be added to a waiting list. **If a beginner to the game, I will be required to have a course of lessons with the Club Professional** or as an existing golfer, I should enclose a current handicap certificate from my Club.

My fees will be payable in full, initially within 28 days of my election and thereafter by 30th April in each year (Rules 10 & 12).

I understand that in applying for Full Playing Membership, I am required to pay a non-refundable deposit of £25.00 which is enclosed with this application form.

If elected to Membership I undertake to observe and be bound by the Rules and Constitution of the Club as amended from time to time.

Yours faithfully

We, the undersigned proposer and seconder of named above are acquainted personally with the applicant and know of no reason for not recommending him/her for Membership of this Club.

We understand that we are required to acquaint the applicant with the Rules of the Club, especially those concerning dress, both on and off the course, and in the etiquette of golf. One of us will undertake to play the first two games of golf with him/her should the application be for any category of playing membership.

NB: The Proposer and Seconder must be Ordinary Full Playing or Senior Full Playing Members of a minimum two years standing. (Rule 10 - Bye-Laws).

PROPOSER: SECONDER:
(BLOCK CAPITALS PLEASE)

SIGNATURE: SIGNATURE

GDPR: As a member of Tehidy Park Golf Club your details will remain on file and be used to send you relevant information in respect of your membership.