

# HEWORTH GOLF CLUB LTD

## Membership Application Form

To the Committee:

I, the undersigned, make application to become a  
**FULL MALE / FULL FEMALE / 5 DAY MEMBER/INTERMEDIATE/ JUNIOR  
/ SOCIAL MEMBER (Delete as necessary) of Heworth Golf Club Ltd.**  
In the event of acceptance, I hereby authorise you to enter my name in the  
Register of Members.

PLEASE COMPLETE IN BLOCK CAPITALS

SURNAME.....TITLE.....

FORENAMES.....

ADDRESS.....

.....

.....

.....

.....

POST CODE.....

TELEPHONE (home)..... (Mobile).....

DATE OF BIRTH.....

E MAIL.....

SIGNATURE..... DATE.....

Signing this form constitutes agreement with references made regarding  
membership in Heworth Golf Club Ltd, Articles of Association.

Previous Club.....

Reason for leaving.....

Current handicap.....Lifetime ID No.....

Last handicap (if lapsed).....

When lapsed.....

We, the undersigned, propose and second the above named for Membership of  
Heworth Golf Club Ltd.

PROPOSER

SECONDER

NAME.....NAME.....

SIGNATURE.....SIGNATURE.....

TEL. NO.....TEL. NO.....