

BALMORAL GOLF CLUB MEMBERSHIP APPLICATION FORM

1914	FOR (OFFICE USE	ONLY			
PLE	ASE PRINT IN BLOCK CAP	ITALS USIN	G BLACK	INK		
Surname of Applicant Christian Name						
Address details			lephone N	lumbers		
		Home			(10) (1) A (12) (10) (10)	
	1	Business				
		Mobile			h-h-h-h-h-h-h-h-h-h-h-h-h-h-h-h-h-h-h-	
Postcode		E-Mail		ierino de colego		
Date of Birth				1000	0.000	
Are you related to any curre	ent Member of Balmoral Go	olf Club?		YES		NO
What is the nature of the re	lationship, if any?					
Are you currently a Member	r of another Golf Club?			YES		NO
If not now, have you at anyt	time ever been a Member	of another G	iolf Club?			
				YES		NO
Name of Golf Club			Н	andicap:		- injector
Period of Membership		Number of				
	All Makes		route plu	,880[
L HEBERY ACCED	T THE TERMS & CONDI	TIONS OF A	AEMPED	CHID ANI	ACRE	
	THE RULES AND BYE-LA					-
	THE ROLES AND BTE-LA	AVV3 OF BA		GOLFO	LUB.	
Signed:			Date:		*	
THIS SE	CTION SHOULD BE COI	API ETED E	RY THE S	PONSOR		
	SER & SECONDER ON B					
N.B. It is essential that the Proposer & Seconder be acquainted with the Applicant.						
The Sponsor MUST be a Full Member of Balmoral Golf Club.						
The Proposer & Seconder MUST be Members of Council of Balmoral Golf Club.						
Name of Sponsor						
Address of Sponsor						
DEOLABATION						
DECLARATION						
(Please fill in as appropriate.)						
In sponsoring this Applicant, I declare that I have known the Applicant for Years and in the						
following capacity and believe that he/she would be a desirable Member						
NAME OF SPONSOR SIGNATURE OF SPONSOR						
NAME OF	SPUNSUK		SIGNATU	KE OF SP	CNSOK	
NAME OF PROPOSER		,	SIGNATURE OF PROPOSER			
NAME OF S		SIGNATURE OF SECONDER				
MAINE OF	LOUIDLIN		J.C.IATO	31 01	O. VIDEI	
						and the second s
DATA PROTECTION REGULATIONS						
Here at Balmoral Golf Club we take your privacy seriously and will only use the above information to						
administer your Membership account and if necessary from time to time make contact with you.						
If you consent	to us contacting you please t	ick the appro	priate for	ms we may		
POST EMAIL	TELE/MOBILE	TEXT	MESSAGE		NONE	

Please indicate your preference in order of merit regarding Membership Category / Categories

Membership Categories - Tick as applicable				
Family Membership	Membership for a Husband / Wife and Two Juveniles			
Full Membership	Full Male/Female Playing Member			
Associate Membership	Male / Female Restricted Playing Member			
5 Day Membership	Male / Female Restricted Playing Member (MON-FRI)			
Junior Membership	Playing Member aged between 18 - 21 years of age			
Junior Associate Member	Restricted Playing Member aged between 18 - 21			
Juvenile Member	Playing member under 18 years of age			
Juvenile Associate Member	Restricted playing member under 18 years of age			
Social Member	Non playing member of Balmoral Golf Club			
	OFFICE LIGE ONLY			
Date of Application Received	OFFICE USE ONLY			
Application Received By	ication Received By Post / Hand			
Date of Submission to Council	Submission to Council			
Decision of Council	Approved for Posting / Rejected By Council			
Date Posted on Notice board				
Response to Posting	No Objections from Members / Objections from Members			
Date of Membership Interview				
Invoice Date of Subscription				
Subscription Paid				
Membership Start Date				
	Sponsor's Additional Comments			
Applicant's Additional Remarks				
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