



1895

# CARDROSS GOLF CLUB



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## APPLICATION FOR JUNIOR MEMBERSHIP

Full name of Applicant (*Mr/Mrs/Ms/Title*): \_\_\_\_\_

If Son or Daughter of existing member, name of member: \_\_\_\_\_

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

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

Telephone: Home: \_\_\_\_\_

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

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

Previous/Current Club(s): \_\_\_\_\_

Handicap: \_\_\_\_\_  
(if current handicap please enclose certificate)

\_\_\_\_\_

**For Office use only:**

Date rec'd: \_\_\_\_\_

Date of I/view: \_\_\_\_\_ By whom: \_\_\_\_\_

Coun.Meet: \_\_\_\_\_ Offered: \_\_\_\_\_

Sub.paid at Entry: \_\_\_\_\_ Date of joining: \_\_\_\_\_

Locker No: \_\_\_\_\_ Mem. Card: \_\_\_\_\_ Key: \_\_\_\_\_ H/Cap: \_\_\_\_\_

Resign: \_\_\_\_\_ Key Ret: \_\_\_\_\_ Monies due: \_\_\_\_\_

Loyalty Card: \_\_\_\_\_