



# Membership Application

## APPLICANT INFORMATION

Please circle your choices where options apply

Full Name: .....

Date of Birth: ..... Mr Mrs Miss Ms Other .....

Address: .....

Town: ..... Postcode: .....

Home Tel No: ..... Mobile Tel No: .....

Email Address: .....

## GOLFING INFORMATION

Current GC: ..... Previous GC's: .....

Playing Handicap: ..... CDH No: ..... New to Golf: .....

## OTHER INFORMATION

To help us include you quickly into M&NGC please answer the following questions:

Who do you know at M&NGC: .....

When do you like to play: Mid-week Weekends Evenings

What type of golf do you prefer to play: Competitive Friendly Mixed

Are you in a golfing society: Yes No

Present employment role & company (if applicable): .....

*From time to time we may choose to send you emails in the form of: Club Marketing – These are emails containing specific club marketing, including information about social nights, functions, competitions etc*

Do you consent to receive marketing emails from us? Yes No

*3rd Party Marketing – These are emails from the club containing 3rd party marketing. These may include special offers from local businesses etc*

Do you consent to receive 3rd Party Marketing emails from us? Yes No

## MEMBERSHIP INFORMATION

Type of Membership Required: FULL 5 DAY FLEXI  
ASSOCIATE 9 HOLE INTERMEDIATE  
OVER 80 STUDENT JUNIOR

Payment Method: Monthly Annually

## AGREEMENT & SIGNATURES

I have read & understand the terms & conditions of membership & agree to abide by the club rules at all times  
(A copy of the Club Rules is available from the Office or on the M&NGC website [www.maltonandnortongolfclub.co.uk](http://www.maltonandnortongolfclub.co.uk))

Signed: ..... Date: .....