



APPLICATION FOR JUNIOR MEMBERSHIP 2011

Full Name: _____ **Title:** _____

Address: _____

_____ **Post Code:** _____

Date of Birth: _____ **Occupation:** _____

Telephone (Daytime): _____ **(Evening):** _____

(Mobile): _____ **(E-Mail):** _____

Details of existing / previous* Golf Club Memberships held _____

If previous Club – reason for leaving: _____

Handicap held YES / NO **Exact Handicap** _____ **Current / Lapsed***

CDH Lifetime Number _____

I would like to apply for membership- **Academy £70** _____ **Full Junior £140** _____

Signed (Applicant):

Date:

As the Parent / Guardian detailed overleaf I endorse this application for membership and I acknowledge that:

1. Filton Golf Club has the right to refuse membership within its absolute discretion and that completion and submission of this form does not signify acceptance as a member.
2. Upon acceptance as a member my child will be bound at all times by the Rules and Regulations of the Club.
3. Upon accepting an offer of membership for my child I become immediately liable for the balance of the current annual subscription and that upon renewal of Membership each year I become liable for the full years subscription.
4. Membership details will be maintained on computer records for the administrative purposes of the Club.
5. I accept responsibility and liability for the conduct and behaviour of my child.
6. I undertake to ensure that they are covered by suitable and adequate third party insurance.

Signed (Parent / Guardian):

Date: