DONCASTER TOWN MOOR GOLF CLUB APPLICATION FOR MEMBERSHIP

Bar Card

GENT / LADY / CADET/JUNIOR/ COUNTRY* (*Delete membership type as appropriate*)

Applicants First name:		Surname name:
Age:	Date of Birth:	
Full Address:		
Post Code:	Tele No. Home:	Mobile:
Email Address:(By supplying your email a	address you are agreeing to re	reive club emails.)
Occupation and Employer	s:	
Have you previously been	a member of Doncaster Town	Moor Golf Club? Yes / No
Details of Membership of G	Other Golf Clubs:	
If you are currently a men club where your handicap		e state below which club you would like to be your Home
I would like my Home Clu	b to be	
Current handicap if applic	cableCDH num	ber if applicable:
Contact Details of first per	son in case of emergency	
Name	Contact Number	Relation
	rs on your application for men d be familiar with the applica	nbership (These must be full members of Doncaster Town nt.
Signature:		Print:
Signature:		Print:
Sponsors Please Note: You	u are expected to introduce the	e prospective member to members of the Management.
Golf Experience: Details	of any past Golf	
State briefly your knowled	ge of golf and its etiquette etc.	:
	meet the Management Committee nformation will be recorded on a	for a preliminary interview before being accepted or otherwise. computer data base.
	ne committee, consider that I have	ules of the golf club and understand that disciplinary action or e contravened the rules. (Copies of the rules are provided when
full twelve-month period. Resules and constitution. Rule 1	signation from the club during an 6.	s and as a member you are required to pay your subscription for a y part of the season will still result in full payment as per the club's
Members must return their d After 28 days, the card will b		signation to redeem any monies that still remain on the card.

Signature of Applicant: ______ Date: _____