



Rosslare Golf Club Membership Application Form

I wish to apply for membership of Rosslare Golf Club and if elected, I agree to abide by the Constitution and all the Rules, Regulations and Bye-Laws of the Club .

Type of Membership

FULL

BURROW

PAVILION

Personal Information:-

Name: _____

Address: _____

Postcode: _____ Home Phone No: _____ Mobile: _____

Email: _____ Date of Birth: _____

Occupation: _____

Are you happy to receive communication by email ? YES/NO

HOW DID YOU HEAR ABOUT US?

FACEBOOK ___ GOOGLE ___ WEBSITE ___ FRIEND/MEMBER ___ NEWSPAPER/MAGAZINE ___
OTHER (Please state) _____

IS ROSSLARE TO BE YOUR HOME CLUB? YES / NO

If NO please state your Home Club G.U.I. No. _____

CLUB NAME : _____

Exact Handicap at present: _____

SIGNATORIES:

(Application must be Proposed & Seconded by a Rosslare member who is a member for three or more years.)

Block Capitals

Signature

Date

APPLICANT: _____

PROPOSER: _____

SECONDER: _____

OFFICE USE ONLY

Date fee received _____ Date on System _____ Rosslare GUI/ILGU No. _____