

MEMBERSHIP APPLICATION FORM

COUNTY CAVAN GOLF CLUB

ARNMORE HOUSE, DRUMELIS, CAVAN, COUNTY CAVAN

Office phone & fax: 049 4331541 (9.30 a.m. to 2.00 p.m. Monday to Friday)

Pro Shop phone: 0494331388 email:cavangc@iol.ie

Please read the reverse side of this Form where the different categories of membership are explained. If unsure as to which category you should apply for, please contact Therese at the above office number.

Please complete this Application Form in Block Capital Letters. Sign and date it where indicated and then return it to the Honorary Secretary.

PLEASE COMPLETE THIS FORM IN BLOCK LETTERS

NAME: _____

ADDRESS: _____

PHONE NUMBERS: _____

EMAIL ADDRESS (IF ANY): _____

DATE OF BIRTH (if Juvenile/Student): _____

IF APPLYING FOR STUDENT MEMBERSHIP, PLEASE DESCRIBE YOUR COURSE:

Proposer: _____ Seconder: _____

(In the case of some categories, the above line may be left blank)

Please indicate the category of membership required:

Man-Full Member []

Lady-Full Member []

Country []

Distance []

Beginner []

Pavilion []

Juvenile []

Student []

Overseas []

I am / was a member of _____ Golf Club and my
current handicap is / last was _____

SIGNATURE OF APPLICANT: _____

DATE: _____

Within 14 days of your notification of election to membership, you must submit the appropriate entrance fee and annual subscription to the Club. Otherwise your election will be deemed to be void.