



Est. 1920

**MEMBERSHIP
APPLICATION FORM**

I, (Print name)

desire to become a Member of Prestonfield Golf Club Ltd., and I hereby agree, if elected, to be bound by all the obligations and conditions of the Memorandum and Articles of Association and Bye-laws and Regulations of the Club.

Date/...../.....

Signature

Please tick membership type:

Full Member

Silver Member

5 Day Member

Country Member

Junior under 18

Junior under 15

Full name

Address

Post Code Date of Birth

Telephone Number (H).....(O).....

E-Mail Address

Occupation

Are you a member, or have you ever been a member, of a golf club? YES / NO

Do you hold or have you held a national handicap within the last five years? YES / NO

If YES give details

For office use only

Date received by Secretary

Registration fee Application acknowledged.....

1st letter sent/...../..... Result

2nd letter sent/...../..... Result