



MEMBERSHIP

Rutland's premier golf complex

APPLICATION FORM 1 April 2019 to 31 March 2020

I WISH TO APPLY FOR MEMBERSHIP OF GREETHAM VALLEY GOLF CLUB

Title First name Surname

Address

Postcode..... Email.....

Tel (home) (work) (mobile)

Previous Club and Handicap and CDH no.

Will GVGC be your sole club? Yes / No If no, will GVGC be your home or away club? Home / Away

Signature Date of Birth

I confirm that I have received and read the Health & Safety Information and Club Rules and agree to abide by them

MEMBERSHIP TYPE REQUIRED (please circle)

7 Day 5 Day Intermediate Junior LifeStyle Adult Academy Junior Academy

+Gym - if Gym as well as Golf is required, please circle golf category preferred & complete Gym Membership forms

GREETHAM VALLEY GOLF CLUB RESERVES THE RIGHT TO DECLINE ANY APPLICATION

For Office Use

- Entered on ESP
- Entered on Card

INTRODUCED BY.....