

ST. REGULUS LADIES' GOLF CLUB

9 Pilmour Links, St Andrews. KY16 9JG
Telephone: 01334 477797 Email: admin@st-regulus-lgc.co.uk

Application for Membership - please provide your personal details

FULL NAME (MRS/MS/MISS) _____
(please include forename)

ADDRESS: _____

POSTCODE: _____

TELEPHONE NO: _____ **MOBILE** _____

E-MAIL ADDRESS: _____
(We will use your email address to send you information about the club's activities.)

DATE OF BIRTH: _____

Membership Category - please let us know which category of membership you would like.

Ordinary Member (23 years of age and over on 1 st January 2015)	Yes / No
Youth Member (18 years of age to under 23 years of age on 1 st January 2015)	Yes / No
Junior Member (9 years of age to under 18 years of age on 1 st January 2015)	Yes / No
Putting Member	Yes / No
Students' Temporary Membership (under graduates at St Andrews University)	Yes / No

Have you previously been a member of this club? Yes / No

Are you a member of any other club? Yes / No

Name of Home Club: _____

Handicap: _____
(if you have one)

CDH id (if known): _____

Link ticket status (tick as appropriate): secured pending

waiting list number (if known)

Applicant's Signature: _____

Proposed by (Name) _____ (Signature) _____

Seconded by (Name) _____ (Signature) _____

If you have no sponsors please state why:

For official use only:

Received:

Approved by Committee:

On Handicap system:

Entered On Database: