



HOPEMAN GOLF CLUB APPLICATION FORM



I, the undersigned, apply to join Hopeman Golf Club as a:

Full adult member	<input type="checkbox"/>	Junior Member	<input type="checkbox"/>
House member	<input type="checkbox"/>	Country member	<input type="checkbox"/>
Winter member	<input type="checkbox"/>	Student member	<input type="checkbox"/>

and hereby state that I will abide by the rules and etiquette of golf as decreed by the Royal and Ancient Golf Club, St Andrews, and by the rules and constitution of Hopeman Golf Club.

Full Forenames:

Surname:

Mr/Mrs/Miss/Other: Date of Birth:

Address:

House name or Number	
Street name	
Town	
City	
County	
Post Code	
Home phone No	Mobile No
Email address	Handicap

Signature of applicant

Date of application

ON SUCCESSFUL APPLICATION, THE CLUB MANAGER OR CLUB SECRETARY WILL NOTIFY THE APPLICANT IN WRITING.

UPON NOTIFICATION, THE APPLICANT WILL HAVE ONE CALENDER MONTH TO PAY THE REQUIRED SUBSCRIPTION, OTHERWISE THE APPLICATION WILL BE NULL AND VOID.