

Whitstable & Seasalter Golf Club

The Clubhouse –Collingwood Road-Whitstable-Kent CT5 1EB Tel: 01227 272020 www.whitstable-golfclub.co.uk

Membership Application 2021/22 Date.....

* I WISH TO APPLY FOR MEMBERSHIP (Please tick the category you are applying for)		
CATEGORY	ANNUAL FEE	TICK AS APROPRIATE
FULL	£708	
JUNIORS /STUDENTS	VARIABLE	
INTERMEDIATE AGE 18-28 YEARS (VARIABLE)	£200/£400	
TRIAL	£500	
SOCIAL	£150	
ALL PLAYING MEMBERS ARE REQUIRED TO PURCHASE AT LEAST £100 SHARES IN THE CLUB		

*NAME.....Mr/Mrs/Miss/Ms/Other

*PREVIOUS/OTHER CLUBS.....CDH Number.....

*PROPOSER (PRINT).....

*SECONDER (PRINT).....

*HOW DID YOU LEARN ABOUT THE CLUB?.....

ADDRESS.....

.....POSTCODE.....

TELEPHONE (HOME).....TELEPHONE (WORK).....

MOBILE.....EMAIL

DATE OF BIRTH.....CURRENT HANDICAP.....

If my application is successful, I undertake to abide by the Club Rules, observe golf etiquette, be of good conduct, promote cordiality and co-operation and discourage confrontation.

SIGNED BY APPLICANT..... DATE.....

SIGNED BY PROPOSER..... DATE.....

SIGNED BY SECONDER..... DATE.....

*I agree that the information given in lines marked * may be displayed on the club noticeboard and that this and other information provided by me, may be stored and used, subject to the Club's Data Protection & Privacy Policy (documents available in the office & at: www.whitstable-golfclub.co.uk).*

Signed:

Applicant.....Date.....Proposer.....Date.....

Secunder.....Date.....

SWIPE CARD NUMBER.....

For Office Use: Date Received

Date letter sent/Club 2000