MEMBERSHIP APPLICATION

MAPPERLEY
GOLF CLUB

Title	Full Name

Date of birth:

Email address (**BLOCK CAPITALS** please)

Home phone number

0	1								

Mobile phone number

0	7								

Home address:

Post code:

Referring member:	**Office use**
	Bar card:

GOLF DETAILS (not required for Social members)

Previous club, if any:

Most recent handicap: Date: CDH No.

Membership Category	✓	Membership Category	✓	Membership Category	✓
A1: 7 day member		J1: Nippers under 12		C5: Summer member	
A2: 6 day member		B1: Age 12 to 18 member		C6: Flexible member	
A3: Age 75+ 7 day member		B2: Age 19 to 22 member		C11: Student member	
A4: Age 75+ 6 day member		B3: Age 23 to 26 member		E1: Country member	
		B4: Age 27 to 30 member		C1: Age 75+ 9 hole member	
S1: Social member		B5: Age 31 to 34 member		C12: Age 85+ 9 hole member	

	Yes	No
Please tick to confirm that you are happy to receive Information from Mapperley Golf Club		

I agree to the Terms and Conditions of Mapperley Golf Club and understand that Golf is played at my own risk, which includes all weather conditions, and it is my responsibility to ensure that I am adequately insured whilst playing golf.

Signed (by applicant) …………………………………..… Date ……………………....

Signed (by parent, if applicant under 13 years of age) ……………………………………