



Lincoln Golf Club

Application for Membership

Membership Category Requested			
Full		Intermediate	
Flexible		Young Persons / Student	
Social		Practice	

Personal Details	
Full Name	
Date of Birth	
Home Address	
Postcode	
Email	
Mobile	
Home Telephone	
Occupation	
Employer's Name	
Employer's Address	
Business Telephone	

Golf Details			
Current Golf Club			
Handicap Index		CDH no.	

Sponsor Details	
Proposer's Name	
Address	
Time known applicant	
Signature	

Sponsor should be a current member of Lincoln Golf Club.

Declaration			
Signature		Date	

The applicant hereby certifies that, should the application be successful, he/she agreed to be bound by the club rules in force from time to time.

For Office Use Only			
Date Joined			
Membership Number			
	Complete	Date	Notes
Invoice sent			
Invoice Paid			
Email to Captain			
Email Handicap Secretary			
Follow-up welcome			
Notes			