I apply for membership of Greenmount Golf Club Limited. I agree, if elected, to become a member of the said club and to be bound by the memorandum and Articles of Association and By-laws of the club for the time being in force.

FULL Name of Candidate :

Address :

Postcode :

Home Tel : Mobile :

Email Address :

Class of Membership : Full – Lady – Associate – Country – Social – Junior

Date of Birth :

Occupation or Status :

Other Golf Clubs (if any) :

Signature of Candidate : Date :

The above candidate is personally known to us and we believe him (or her) to be a suitable person to be elected a member of Greenmount Golf Club Ltd.

Will Proposer and Seconder please sign AND print their name.

Proposer Sign : Print :

Seconder Sign : Print :