

# APPLICATION FOR MEMBERSHIP

## STONEHAM GOLF CLUB

Monks Wood Close, Bassett, Southampton, SO16 3TT

Telephone: Manager 02380 769272

### CANDIDATE'S DETAILS

|                                      |  |
|--------------------------------------|--|
| TYPE OF MEMBERSHIP BEING APPLIED FOR | <b>FULL – 5 DAY - JUNIOR - NON-PLAYING</b> |
|--------------------------------------|--|

|                                |                     |                    |
|--------------------------------|---------------------|--------------------|
| <b>Surname:</b> Mr/Mrs/Miss/Ms |                     |                    |
| <b>First Name(s):</b>          |                     |                    |
| <b>Date Of Birth:</b>          | <b>Nationality:</b> | <b>Occupation:</b> |

|  |                          |
|--|--------------------------|
| <b>ADDRESS (Block Capitals Please)</b> | <b>Business Name:</b>    |
| <b>Home:</b>                           | <b>Address:</b>          |
|  |                          |
|  |                          |
| <b>Post Code:</b>                      | <b>Post Code:</b>        |
| <b>Telephone Number:</b>               | <b>Telephone Number:</b> |
| <b>Mobile:</b>                         | <b>E-Mail:</b>           |

|  |    |
|--|----|
| <b>Name and addresses of Golf Clubs of which Membership is currently held:</b> |    |
| 1)   | 2) |
|  |    |

|   |    |
|---|----|
| <b>Length of Membership at current golf club(s):</b> 1)                                 | 2) |
| <b>Name of other Golf Clubs of which Membership has been held in the last 10 years:</b> |    |
|   |    |

|                                  |  |
|----------------------------------|--|
| <b>Current playing handicap:</b> | <b>(Certificate to be provided at time of application)</b> |
|----------------------------------|--|

|                               |
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| <b>Best playing handicap:</b> |
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*Please continue overleaf and complete all details.*

