

MEMBERSHIP



APPLICATION

I WISH TO JOIN DINAS POWIS GOLF CLUB AS A:

FULL MEMBER

JUNIOR MEMBER

COUNTRY MEMBER

SOCIAL MEMBER

STUDENT MEMBER

NAME AND ADDRESS OF APPLICANT (PLEASE PRINT)

NAME: _____

ADDRESS: _____

_____ **POST CODE:** _____

TELEPHONE: HOME: _____ **BUSINESS:** _____

MOBILE: _____ **E-MAIL:** _____

DATE OF BIRTH: _____ **OCCUPATION:** _____

IF APPLYING FOR COUNTRY MEMBERSHIP PLEASE STATE NAME OF PRESENT CLUB: _____

PLEASE GIVE DETAILS OF OTHER GOLF CLUB MEMBERSHIPS:

HANDICAP: _____

SIGNATURE: _____ **DATE:** _____