



# Portumna Golf Club

Ph: 0909-741059 Email: info@portumnagolfclub.ie

## Application for Membership

### Type of Membership

Full Ordinary		Family A		Family B		Student	
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Junior		Pavillion		*Country		*Intermediate	
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### 1<sup>st</sup> Applicant

<b>Name:</b>		<b>E-mail address:</b>	
<b>Address:</b>			
<b>Telephone No:</b>		<b>Mobile No:</b>	

### 2<sup>nd</sup> Applicant

<b>Name:</b>		<b>E-mail address:</b>	
<b>Address:</b>			
<b>Telephone No:</b>		<b>Mobile No:</b>	

### Junior Family Members

<b>Name:</b>		<b>D.O.B.:</b>	
<b>Name:</b>		<b>D.O.B.:</b>	
<b>Name:</b>		<b>D.O.B.:</b>	

### Name of Clubs of which you were previously a Member (if any):

<b>Club(s):</b>	

<b>Name of Present Club (if any):</b>		<b>Contact No:</b>	
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<b>Which Club will be your Home Club:</b>		<b>Present Handicap:</b>	
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Please provide Handicap Certificate(s)

If Lapsed Member please state:

Last Handicap: \_\_\_\_\_ Year of Last Handicap: \_\_\_\_\_

Payment received: Yes / No Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Applicants Signature: \_\_\_\_\_

We confirm above details to be correct, and we recommend applicant for membership.

Proposed by: \_\_\_\_\_  
Committee Member

Seconded by: \_\_\_\_\_  
Member of at least three years standing

\*Proof of membership to another club is required to avail of Country Membership

\*\*Proof of date of birth is required to avail of Intermediate membership