

SWORDS GOLF CLUB

MEMBERSHIP PROPOSAL FORM 2010 APPLIC. NO.

NAME:	
ADDRESS:	
TELEPHONE	

E-MAIL ADDRESS:

DID YOU APPLY LAST YEAR?	YES/NO
HAVE YOU APPLIED PRIOR TO THAT?	YES/NO

PREVIOUS GOLFING EXPERIENCE

DO YOU HAVE A CURRENT/PREVIOUS GUI HANDICAP?	YES/NO
DO YOU HAVE A GOLF SOCIETY HANDICAP	YES/NO

IF YES PLEASE PROVIDE DETAILS:

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PROPOSED BY* (MUST BE A MEMBER OF SWORDS GOLF CLUB)	DATE	MEMBER NO.

SECONDED BY (MUST BE A MEMBER OF SWORDS GOLF CLUB)	DATE	MEMBER NO.

PLEASE SEE OVER

***FOR PROPOSER:** Please add one or two short comments about the applicant which you feel may be relevant and may influence the decision of the selection committee, ie family member, work colleague, how long you've known the applicant, in what capacity you know him etc.

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- 1 **APPLICANTS PLEASE NOTE: BY SIGNING THE ABOVE FORM YOU UNDERTAKE TO BE BOUND BY THE RULES OF 'SWORDS GOLF CLUB'.**
- 2 **SUCCESSFUL APPLICANTS WILL BE CONTACTED IN EARLY MARCH, BUT DUE TO THE EXPECTED VOLUME OF APPLICATIONS IT MAY NOT BE POSSIBLE TO CONTACT ALL THOSE WHO ARE UNSUCCESSFUL.**
- 3 **MEMBERS ARE ONLY PERMITTED TO PROPOSE ONE, AND SECOND ONE MEMBERSHIP APPLICATION.**
4. **COMPLETED FORMS MUST BE RETURNED TO THE *HON. SECRETARY, 'SWORDS GOLF CLUB', BALHEARY AVE., SWORDS, CO.DUBLIN* BY WEDNESDAY 24th FEBRUARY 2010.**

APPLICANTS SIGNATURE	DATE: