

Baildon Golf Club

Moorgate, Baildon, Yorkshire BD17 5PP. Tel 01274 584266 Secretary: Mrs Louise Broadhead Email: secretary@baildongolfclub.com

MEMBERSHIP APPLICATION FORM

Please note we use this information to allow us to manage our obligation to you in accordance with the club articles. This information may be shared with our internal management team and external club systems providers but only in adherence with our club privacy policy.

By entering in to a membership agreement with the club you consent to use of your data in this way.

| BLOCK CAPITALS PLEASE (* Required field) | | | | | |
|--|-------------|-------------|-----------------|------|--|
| Title: | Full Name*: | | | | |
| Address*: | | | | | |
| | | Po | ost Code*: | | |
| Telephone No*: | | | Mobile: | | |
| E Mail: | | Da | ate of Birth*: | | |
| I wish to apply for the following membership category*: | | | | | |
| Premium | | Flex | xible | | |
| Club | | Sec | condary/Country | | |
| Standard | | Soc | cial | | |
| (In line with safeguarding measures, for Junior membership please enquire directly with the office.) | | | | | |
| I have played in the past but have not recently held membership of a club I am/have recently been a member at | | | | | |
| ** Copy available online or on request through the Club Secretary | | | | | |
| Membership of the club is open to all subject to the review of the Management Committee, to support your request please list the names of any members that are prepared to sponsor your application: | | | | | |
| Sponsor | Name | Years known | Signature | Date | |
| Proposer | | | | | |
| Seconder | | | | | |