

STUDENT GOLF MEMBERSHIP APPLICATION FORM 2021

Age 18 – 25 Proof of Age must be supplied – Drivers Licence or Passport

ENTER DETAILS - PLEASE USE BLOCK CAPITALS

Name:	
Address:	
	Date of Birth:
Telephone: Mobile	Home
E-Mail:	
Current Golf Club & Handicap:	
Golf Society (if applicable):	
I hereby apply for membership of Bear	rna Golf Club from April 1 st , 2021 – March 31 st , 2022
Signed:	
Date:	
Total Member Subscription: €250 (mer year until Member is no longer in age cate	ns/ladies club fee is €50 extra; fee will stay the same every egory)
Pay by Bank Transfer: BIC - BOFIIE2D Or call proshop and pay by credit card	
I give permission to be contacted by the	ne Ladies / Men's Club: Yes / No
Please return completed application forms	s to: FOR OFFICE USE
Email:info@bearnagolfclub.com OR Post to: Secretary Manager, Bearna Golf Club, Bearna,Co Galway	TOTAL SUB: FULLY PAID (Y/N):