



Cliftonville Golf Club Ltd

44 Westland Road, BELFAST, BT14 6NH
Tel: Office: 028 9074 4158, Shop: 028 9022 8585
Email: CliftonvilleGC@gmail.com

APPLICATION FOR MEMBERSHIP

Please tick the Membership Category you are applying for:

- | | | | |
|--|--------------------------|------------------------|--------------------------|
| Adult Member: Aged 30+ | <input type="checkbox"/> | Senior Member: Over 67 | <input type="checkbox"/> |
| Junior Member: 18 to 29 | <input type="checkbox"/> | 5 Day Member (Mon-Fri) | <input type="checkbox"/> |
| Student: Under 23 | <input type="checkbox"/> | Student: Under 23 | <input type="checkbox"/> |
| Juvenile Member: 16-17 | <input type="checkbox"/> | Juvenile: Under 16 | <input type="checkbox"/> |
| Flexi Golf Member | <input type="checkbox"/> | House Member | <input type="checkbox"/> |
| Family Membership (2 Adults & dependents under 18) | | | <input type="checkbox"/> |

APPLICANT'S DETAILS (please complete all details clearly):

Title: (Mr/Ms/Mrs/Other) _____ Surname: _____

Forename(s): _____

Address: _____

Post Code: _____ Daytime Tel No: _____ Mobile: _____

Date of Birth: _____ Email Address: _____

Previous Club, Golf Ireland Membership Number and Handicap Index (if applicable):

Communications

The Club will communicate with you regarding your membership and the Club's activities by email. If you do not have an email address then we will contact you by phone.

Our Privacy Policy can be viewed on our website, but if you need further information, please write to the Club's Data Controller at the email/address above.

In joining Cliftonville Golf Club as a golfing member, you consent to share your details with Golf Ireland for the purposes of handicap administration and using the World Handicapping System. Your Handicap Index will be made available to other members of the Club via MyGolf and other technology platforms for the purposes of Peer Review.

Applicant Undertaking

Upon becoming a member of Cliftonville Golf Club, I undertake to pay annual subscriptions and other fees the Club may charge immediately they become due. I will observe the rules and regulations of the Club and will familiarise myself with the rules and etiquette of golf.

Name of Current Member who has introduced you (if applicable): _____

Signature: _____ Date: _____

FOR OFFICE USE:

Application form received by:

Application approved by:

Bar Card Number:Golf Ireland Membership Number: