Gort Golf Club



Membership Application

Name					
Address					
Contact No					
Email	The club may email me with news/offers: Yes No				
Date of Birth	Req'd for Insurance Purposes ONLY				
Membership Category There are restrictions on certain categories of membership; please refer to the current schedule of membership fees or enquire at the Clubhouse					
Ordinary 🗆		Husband/Wife □	Recreational	Introductory	
Distance		Country/Overseas	Pavilion	Long Term □	
Minor		Junior	Student	Non-Student □	
Senior □ Category 1 □ Category 2 □ Category 3					
Have you played o	golf	before?	No □ Yes □		
Are you a current	mer	mber of any other Club?	No □ Yes □ → CD	H ID No:	
If Yes, Name of Club:			Handicap:		
PROPOSED BY:			SECONDED BY:		
Proposer and Seconder must be Full Ordinary Members of Gort Golf Club					
rules, regulations and C	onsti	hip of Gort Golf Club, and if ele itution of the Club during my m nd I understand that the inform	embership. I confirm that the	e above details are correct to	
APPLICANT SIGNATURE:			DATE:		
ACCEPTED BY:			DATE:		