

Heworth Golf Club

Membership Application Form

Please complete in block capitals

Surname:			Foren	ames:				
Home Address:								
Post Code:			Email	Addres	s:			
Telephone Number:			Mobile	Mobile Number:				
Date of Birth:								
Category of membership:	Junior	Student	22-25	26-30	Full	Five Day	Country	
	CASC*	Social						
*We are members of income individuals -				ne (CAS	C) and	offer affordab	le membership to lov	
Will Heworth Golf Club be your Home Club for handicap pur				?	Yes	No		
Official Handicap:								
I hereby apply to become a due. I agree in all respects t						to pay, such s	subscriptions as are	
Signature:			Date:					

Junior Applications Only

	Parent's details (if members):					
Surna	nme:					
Foren	names:					
	Please complete and return to:					
	The Secretary Heworth Golf Club Muncaster House Muncastergate York YO31 9JY 01904 426156 heworthgc@tiscali.co.uk					
	Office Use Only					
Cate	gory of membership offered:					
Subs	scription paid:					
Ackr	nowledged Rules issued:					
	<u>Notes</u>					
1.	Applicants for playing membership will normally be required to attend a welcome meeting with th Secretary					
2.	Membership dates from payment of subscription					
3.	Social and 5 Day memberships are not open to juniors.					
4.	Country Membership is only open to those persons who normally reside not less than 20 miles from the clubhouse.					