



Woodenbridge Golf Club

Membership Application Form

Membership Year:

Application Date:

Personal Details:

Title*:	First name*:	Last name*:
Home Address*:		Telephone (Home):
		Telephone (Work):
Email address*:		Mobile*:
Occupation:	Employer:	Date of Birth*:

Golfing Experience and History:

Are you currently, or have previously been, a member of a Golf Club(s)?*	Yes	No
If Yes, please provide the name of the Golf Club and the number of years a member and any positions held at the Golf Club:		
How many years have you been playing golf?:	GUI/ILGU/Golf Ireland Card number:	
Highest CONGU/WHS handicap	Lowest CONGU/WHS handicap	Current WHS handicap index
Have you ever played on an Inter-Club golf team? If yes, please provide details.	Yes	No

Other Relevant Details:

Do you have a relationship with any current member of Woodenbridge Golf Club*? If yes, please provide details.	Yes	No
Please provide other information which you think is relevant:		

*must be completed by the applicant



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THIS PAGE WILL BE DISPLAYED ON THE NOTICEBOARD FOR 14 DAYS

PHOTO

Applicant Details:

Name:	Address:
Membership Category:	
Current Handicap Index:	
Signature: <i>By signing this form, I agree to abide by the Rules of Woodenbridge Golf Club.</i>	Date:

Proposer/Secunder Details:

Proposed by (print name):	Signature:
Number of years you know the applicant:	
Secundered by (print name):	Signature
Number of years you know the applicant:	

Please Note:

1. The application must be accompanied by a letter from the Proposer and Secunder detailing why the applicant would make a good member of the club.