

BAXENDEN AND DISTRICT GOLF CLUB LIMITED

Membership Application Form

I wish to become a member of Baxenden & District Golf Club Limited and, if accepted, agree to be bound by the Memorandum and Articles of the Association and Bye-laws of the Club.

The following details are correct (PLEASE PRINT USING BLOCK CAPITALS PLEASE)

Title: **First Name:** **Surname**

Address:

Town:

County: **Postcode**

Tel No: **Email:**

Date of Birth: **Age on 1 January 2019:**

Are you, or have you ever been a member of another golf club?	
If you have answered YES, please give details:	
Lowest Handicap achieved:	

Membership Category			2019 SUBS	PLEASE TICK
7-day membership	Monday-Sunday	Male	£535	
		Lady	£475	
6-day membership	Sunday-Friday	Male	£475	
		Lady	£285	
5-day membership	Monday-Friday	Male	£400	
		Lady	£285	
55+ 5-day membership	Monday-Friday	Male	£350	
Intermediate membership	Aged 19-25 years as at 1 st January		£280	
Junior Membership**	All Juniors	Male	£55	
		& Lady		

**Junior members will only be allowed to play in Men's Club & Open competitions (white tees) providing they meet the following criteria and pay subscriptions equivalent to an Intermediate member (£280.00)

1. if their handicap is less than their age (i.e. 14 years old, handicap 13) **OR**
2. if they are 16 years old or over and have a handicap of 24 or less

Signed: **Date:**

Introduced by:

XXXXXXXXXXXXXXXXXXXX

After acceptance, and upon payment within 7 days of the subscription fee, the applicant shall become a member of Baxenden & District Golf Club Limited.

For office use only			
Date received		
Date invoiced	Date paid

Upon completion, please return to Neil Turner, Baxenden Golf Club, Whooley Lane, Baxenden, Accrington BB5 2EA