



SILVERDALE GOLF CLUB

ESTABLISHED 1906

Membership Application Form

Name (Block Capitals): Title:

Residential Address:

..... Post Code:

Home Telephone No: Mobile:

Email: D.O.B:

Occupation: Car Reg:

(If retired please also give former occupation) :

Membership Category

Full	Intermediate (Age 35-39)	University (Student Card)
5 day	Intermediate (Age 26-34)	
CASC Low Income 4 day	Intermediate (Age 18-25)	Winter (1 st Oct – 31 st Mar)
11 Hole	Junior Buddy	£1 per Day - 1 st Full Year
Country (40 miles +)	Junior (Age 10-17 With H'cap)	Caravan 1 st Year
Associate	Junior (Age 10-17 No H'cap)	Step into Golf
Social	Junior Under 10	Practice Pass

Present golf club (If any):

If member of more than one club please designate home club:

Handicap (If any): CDH No:

Previous golf club (if not now a member of a club):

Date of membership Handicap then held:

Approximate number of times played at Silverdale in last 12 months:

Reason for choosing Silverdale Golf Club?
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Data Protection: I am happy for you to communicate with me by Post Email Telephone Mobile

I am happy for you to share my information with the Club PGA Professional

Please Note: All information given will be treated as in our GDPR (General Data Protection Regulation) policy

Signature: Date:



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For Office Use Only

Action	Date	Comments
Application received:		
Payment received:		
Entered on System:		
Personal Data Audit Given/Posted		
Bag tag & fixture list given/posted:		
Welcome Letter Sent:		
New Member Pack sent/given:		
New member survey sent:		
New member survey returned:		
Reason for choosing Silverdale:		
Notes:		