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| **GATEHOUSE GOLF CLUB APPLICATION FOR MEMBERSHIP**Name/s (inFull)……………………………………………………………………………..Home address…………………………………………………………………………………………………………………………………………………………………………………….E.mail …………………………………………………………Phone No…………………Type of Membership applied for (please tick) Junior 5-11years Junior 12-16 years Youth 17-18 years Student 18-23 years in full time education Adult(Ladies & Gents)Date of birth ..........………….CDH no........................................ |
| **Note. If you wish Gatehouse GC to be your ‘Home Club’ for handicap purposes, a handicap certificate from your previous club should be attached to this application. If no certificate is attached it will be assumed that your handicap with be administered by Gatehouse GC.****I WISH TO APPLY FOR MEMBERSHIP OF GATEHOUSE GOLF CLUB AND AGREE TO ABIDE BY THE RULES AND CONSTITUTION OF THE CLUB.****Signed……………………………………………………..Date………………………………****For 2024,membership rates are:-**Adults (Ladies & Gents) £270.00 Student(18-23) £60.00 Youth 17-18 years £45.00 Juniors 12-16 years £30.00 Juniors 5-11 years £10.00 |
| Please send completed form together with payment to:- Membership Secretary Gatehouse Golf Club Laurieston Road Gatehouse of Fleet Castle Douglas DG7 2BE Or by bank transfer to Sort Code 80-06-11 Account 00404550Contact Hopedene@hotmail.com or info@gatehousegolfclub.com   |