

# Lisselan Golf Club

## Country Membership Application Form

Name (PRINT): .....

Residential Address: .....

.....

.....

Telephone Number: .....

Email Address: .....

Date of Birth: .....

Please state name and address of Home Club: .....

.....

Do you have a Golf Union Handicap? (Tick Box)  NO  YES

If yes, please state your Handicap: ..... GUI/ILGU 8 Digit No: .....

With which club? .....

**Proposed by (Member):**

**Seconded by (Member):**

Name: ..... Name: .....

Address: ..... Address: .....

Tel. No.: ..... Tel. No.: .....

*I hereby confirm all information supplied above to be accurate and truthful.*

Signed: ..... Date: .....

*Country Membership: Applicant's residential address more than 40 Miles (64 km) from Lisselan Golf Club.*