



Tel: 01492 623330
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Web: www.pengolf.co.uk

Application for Membership

Date:

I wish to apply for membership of Penmaenmawr Golf Club in the following category*;

- **Full Playing**
- **5 Day**
- **Caravan**
- **Country**
- **Colt (18/19/20/21/22/23/24/25/26) on 1st March**
- **Junior (12 & under/13 -14/15-17) on 1st March**
- **Social** (Spouse or partner of Playing Member £20)
- **Social** (Not spouse or partner of Playing Member £30)

PLEASE INDICATE WHICH CATEGORY IS BEING APPLIED FOR
(Payments are preferred in full. Please see Club Secretary for Instalment options)

Name: (Mr/Mrs/Miss/Master)

Address:
.....

Post Code: Tel: Mobile:

Email Address: Date of Birth: / /

If moving from another Club, please enter Club Name:

Current Handicap (Certificate will be required)

COMPLETE THIS SECTION ONLY IF BEING INTRODUCED BY A MEMBER CLAIMING ON THE DISCOUNT SCHEME

I have been introduced to Penmaenmawr Golf Club by

Current Members Signature Club Number:

Subscriptions are due on the 1st March, Annually

All communications to the Club Secretary