

# MEMBERSHIP APPLICATION FORM

Please complete and return with your subscription.

I WISH TO APPLY FOR MEMBERSHIP OF TOFT COUNTRY HOUSE HOTEL GOLF CLUB.

Please complete in block capitals

(If your details are the same as last year please just enter name, age & signature)

Title:.....

First

name:.....Surname:.....

Date of Birth:..... Age at 18/04/2015:.....

Full/Senior/5day/Joint/Joint Senior/Youth/Junior (please circle which applies)

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

Postcode:.....

email:.....

Tel (home):.....

Present or previous club:.....Handicap:.....

Signature:.....

Type of payment:.....

I would/would not be interested in joining the A, B or C team  
Toft Country House Hotel & Golf Club reserve the right to decline any application