

# APPLICATION FOR MEMBERSHIP

(01-10-2008-30-09-2009)

**TYPE OF MEMBERSHIP BEING APPLIED FOR** \_\_\_\_\_

(SEE OVER LEAF FOR CATEGORIES)

**Name**

(Block capitals)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mobile Phone No.** \_\_\_\_\_ **E-mail address** \_\_\_\_\_

**Family Members:**

<b>NAME</b>	<b>DATE OF BIRTH (If Junior Member)</b>	<b>PRESENT/PREVIOUS CLUB (if any)</b>	<b>EXACT HANDICAP (if any) PLEASE ATTACH HANDICAP CERT FROM PREVIOUS CLUB</b>

**If applicant or any family members are more than 18 years and attending third level education state name of Institute.**

<b>NAME</b>	<b>INSTITUTE</b>
1.	
2.	

**Proposed by** \_\_\_\_\_

**Seconded by** \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_