

OLTON GOLF CLUB LIMITED

APPLICANT

TITLE _____ SURNAME _____ FORENAMES _____

ADDRESS _____ TELEPHONE _____

_____ EMAIL _____

OCCUPATION _____

BUSINESS ADDRESS _____

(or School if Junior)

_____ TELEPHONE _____

DATE OF BIRTH _____ MARITAL STATUS _____

PRESENT CLUB _____ HANDICAP _____

If elected as a member of the Company/Club, I agree to be bound by the Articles of Association of the Company.

Golfing Experience, Golf Club Work, Interests, Achievements

SIGNATURE OF APPLICANT _____ DATE _____

SPONSORS

Proposers and Seconders of potential members should be aware of their responsibilities regarding the introduction of members to the Club. These are outlined in 'Notes for Guidance' which members should obtain from the Secretary before agreeing to act as Sponsors.

PROPOSER _____ (Name in full)

Signature _____

SECONDER _____ (Name in full)

Signature _____

DATE COMPLETED APPLICATION RECEIVED BY O.G.C:

REF:

**SPONSORS SHOULD PROVIDE SUPPORT FOR THEIR CANDIDATE IN WRITING.
SUPPORTING COMMENTS CAN BE MADE BELOW OR IN A SEPARATE LETTER TO THE
CLUB SECRETARY**

PROPOSER'S COMMENTS

SIGNATURE _____ DATE _____

SECONDER'S COMMENTS

SIGNATURE _____ DATE _____