SKIPTON GOLF CLUB LIMITED

SHORT LEE LANE, SKIPTON, NORTH YORKSHIRE BD23 3LF
BUSINESS MANAGER 01756 795657

APPLICATION FOR MEMBERSHIP

I the undersigned, hereby apply for membership of Skipton Golf Club Limited in the category indicated below. I confirm that should my application be successful I will abide by the terms and conditions of the Company's Memorandum and Articles of Association and its Rules and Byelaws as published and modified from time to time and I request you to maintain my name on the Register of Members accordingly.

SURNAME: (Please print)	MR MRS MS MISS Other (please state)
OTHER NAMES: (Please print)	DOB:
ADDRESS	Post Code:
e-mail	

I would like to receive the weekly Newsletter by email ……YES / NO*

I hereby confirm that I have no objection to receiving information regarding forthcoming SGMs and AGMs or other communications electronically .....(signature)
Email address to be used : as above / other* …… ……(specify)
* delete as appropriate

Telephone	Home: Business: Mobile:

Occupation	
Business Address	Post Code:

TYPE OF MEMBERSHIP (please circle) FULL COUNTRY WINTER INTERMEDIATE JUNIOR SOCIAL	Previous member of Skipton Golf Club YES / NO Previous Club ..... From: ..... To:..... Handicap ..... Official Posts held

On admission to membership you will be allotted 1 ordinary share in Skipton Golf Club Limited (the "Company") and have a vote at the Company's meetings. No share certificate will be issued but you will be entered on the register. By signing this form you will irrevocably authorise the Company to transfer your 1 ordinary share to its nominee in the event that you cease to be a qualifying subscription paying member of SGC (full adult/intermediate/senior member).

APPLICANT'S SIGNATURE	DATE .....