SKIPTON GOLF CLUB

SHORT LEE LANE, SKIPTON, NORTH YORKSHIRE BD23 3LF

manager@skiptongolfclub.co.uk | 01756 795657

MEMBERSHIP APPLICATION FORM

OFFICE USE ONLY

CDH: _____

MEMBER NO: _____

CARD NO: _____

INVOICED: _____

PAID: _____

APPLICANT DETAILS

Title (please tick)	☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other: _____
Surname	
Other names	
Date of birth	
Address	
Postcode	
Email address	
Occupation	
Telephone – Home	**Business:**
Mobile	

MEMBERSHIP CATEGORY

Please tick ONE category. If you are applying for a Get into Golf or Lifestyle membership, select the relevant stage/level.

☐ **Full**	☐ **Get into Golf – Stage 1**
☐ **Country**	☐ **Get into Golf – Stage 2**
☐ **Intermediate**	☐ **Get into Golf – Stage 3**
☐ **6 Day Flexible**	
☐ **Weekday**	☐ **Lifestyle Membership – 1**
☐ **Junior / Social**	☐ **Lifestyle Membership – 2**

GOLFING BACKGROUND

Previous member of Skipton Golf Club?	☐ Yes ☐ No
If yes, dates of membership	From: _____ Until: _____
Previous golf club(s)	
CDH (Central Database of Handicaps) number & handicap	No : Handicap

Please list ALL previous golf clubs you have been a member of, with dates:

Previous clubs and dates

Reason(s) for leaving previous club(s):

Reason(s) for wishing to join Skipton Golf Club:

HOW DID YOU HEAR ABOUT US?

Tick all that apply:

☐ Friend / Colleague ☐ Printed / Radio Advert ☐ Internet / Social Media ☐ Joe Lovery ☐ Banner at Club

☐ Golf Club Website ☐ Other: _____

CLUB SPONSOR (IF APPLICABLE)

If a current member is sponsoring you, please ask them to complete this section. Your sponsor will be responsible for mentoring you and helping you integrate into the Club.

Member name	
Sponsor signature	**Date:**

APPLICANT DECLARATION AND SAFEGUARDING

I apply for membership of Skipton Golf Club in the category indicated above. If my application is successful, I agree to abide by the Club's Rules and Byelaws and request that my name is maintained on the Register of Members.

Skipton Golf Club Ltd is a Community Amateur Sports Club (CASC). It is wholly open, without discrimination, to all sections of the community; has the promotion of amateur sports participation at its heart; and distributes no profit, reinvesting any surplus in the Club.

The Club expects members to show respect for others and behave appropriately towards staff, visitors and fellow golfers. Applicants are required to abide by the Club's current rules, byelaws and standards of acceptable conduct. Applications are reviewed by the Board of Directors before membership is confirmed.

1. **Have you ever been known to any Children's Services department or Police as being a risk or potential risk to children or vulnerable adults?**
   ☐ Yes ☐ No If yes, please provide details:

2. **Have you been the subject of any disciplinary investigation and/or sanction by any organisation due to concerns about your behaviour towards children or vulnerable adults?**
   ☐ Yes ☐ No If yes, please provide details:

Applicant signature	**Date:**

IMPORTANT INFORMATION

All forthcoming SGM and AGM information and other Club communications, including the weekly Club Newsletter, will be sent electronically to the email address provided unless you specifically request otherwise via the office.

On admission to adult playing membership only, you will be allotted one ordinary share in Skipton Golf Club Limited and have a vote at the Company's meetings. No share certificate will be issued, but you will be entered on the share register. By signing this form, you irrevocably authorise the Company to transfer your one ordinary share to its nominee if you cease to be a qualifying subscription-paying member of Skipton Golf Club.

Your application will be considered by the Board at its next meeting. On payment of the required subscription fee, you will be entitled to play the course and use the facilities. If your application is declined, you will be entitled to a full refund.

Thank you for your application to become a member of Skipton Golf Club Ltd.