



**APPLICATION FOR TRIAL MEMBERSHIP**

I wish to become a Trial Member of Saffron Walden Golf Club, and I hereby agree to be bound by the regulations and rules of the Club. I have no objection to the personal information on this form being held on the Club's computer system.

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TEL: \_\_\_\_\_ WORK/MOBILE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ D.O.B: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

I understand that it is a condition of membership that I accept and abide by all decisions made by the General Committee.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PROPOSER: \_\_\_\_\_

SECONDER: \_\_\_\_\_

**SECTION 2**

I understand that, before being allowed to play on the course, a Certificate of Proficiency must be provided from the Club Professional. The Professional will issue this if he feels you are at a standard of golf that is acceptable on the course during an arranged lesson.

Please give details of any previous Golf Club membership and/or golfing experience:

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

For Office use only							
Prof Cert		NB Date		Ack		Invoice/Info	
		Proposer		Secunder			