



NEATH GOLF CLUB
CWMBACH ROAD
CADOXTON
NEATH
SA10 8AH

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The Secretary, Neath Golf Club, Cadoxton, Neath, SA10 8AH

Dear Sir,

NOMINATION OF CANDIDATE FOR MEMBERSHIP

(Please complete in BLOCK LETTERS)

Full Name.....

Address.....

.....

..... Post Code.....

Home Telephone Number.....

Mobile.....

E-mail.....

Date of Birth..... Occupation.....

as a: (please tick the relevant category)

Membership Category		Membership Category	
Full Playing Member		Junior (15-18 years)	
Country		Junior (0-14 years)	
Intermediate (18-21 years)		Social	
Intermediate Student (18-22 years)			

If you have previously been a member of a club please show below:

Club..... Handicap.....

Declaration by Candidate:

I apply for membership of the Club and agree to abide by the rules and regulations and if accepted to remit all such entry fees and subscriptions called for.

Signed (Candidate)..... Date.....

Additional Declaration by Country Members:

I am a full playing member of Golf Club and will advise you immediately should membership cease.

Date received by Secretary..... Signed..... (Secretary)