

WREKIN GOLF CLUB



MEMBERSHIP APPLICATION 2019 – 2020

Please complete the form in **BLOCK CAPITALS** & return to: THE SECRETARY, WREKIN GOLF CLUB LTD, ERCALL WOODS, GOLF LINKS LANE, WELLINGTON, TELFORD, TF6 5BX.

Title	Mr / Mrs / Ms	/ Miss / other (delete as appropriate)
First name (s)		
Surname		
Address		
Postcode		
Telephone	Mobile:	
Email address	Landline:	
Date of birth Previous Golf Club(s) (if applicable) Name of other Golf Club(s) (if remaining a member) State your 'Home' club for handicap? CDH number if allocated Current handicap Date when last active? How did you hear of WGC?	Actual -	Age: Playing -
The decision of the Executive	Board of Wreki	insuccessful, under no circumstances will a reason be given in Golf Club is final. If elected, I agree to abide by & comply on, Rules, Regulations & Bye-Laws of Wrekin Golf Club
I authorise the Secretary of V have been a member to obta		Limited to make enquiries to any Club of which I am or
APPLICANTS		

SIGNATURE......DATE......DATE



WREKIN GOLF CLUB



New Membership Terms & Conditions from 1st October 2019.

All Membership Categories excluding Trial are for a 12 month period from the month of joining.

Lifestyle Membership is by a one off payment

Trial Membership Categories are by a one off payment

Any increase during 2020 will not be applied until your anniversary renewal.

Direct debit instalments are paid via 10 payments for a 12 month membership period.

Payments are due on the 15th of each month.

There is a £40.00 administration fee for choosing to pay via direct debit.

All memberships except Trial are for a 12 month period. Any member wishing at any time to resign their membership or withdraw from the club, shall be required to give written notice to that effect to the Secretary one full calendar month prior and ensure that all subscriptions and other monies due to the end of that membership subscription year. In default of such notice, such member shall be liable to pay his/her subscription for the following year.

I have agreed to the terms and conditions as set out above APPLICANTS SIGNATURE...... APPLICANTS NAME (BLOCK caps)..... Signed on behalf of WREKIN GOLF CLUB Office use **POC Membership Pack Gold Card Number County Card Bag Tag** Fixture Book **DD Form (If Applicable) BRS** Registration **Payment Schedule** Member Get Member Amount to Member recruiting _____