MILL HILL GOLF CLUB

100 Barnet Way, London NW7 3AL

MEMBERSHIP APPLICATION FORM

Membership Type: 7 DAY / 5 DAY / EVO / JUNIOR (Please circle required membership)	*Date:*
Full Name: *D.O.B.* *Age:*	*Home Address:* *Post Code:*
Email Address:	*Mobile Number:*
Gender: *Title:*	*Home Number:*
Current Handicap: *CDH Number:*	*Have you ever held a handicap: YES / NO* *If so, what was it and when was it held*

We use the information above to allow us to fulfil our contractual obligations to you as a member in accordance with our club's articles/rules/constitution. We share this information with our external and internal Data Processors who adhere to our privacy policy. We would also like to be able to correspond with you regarding our club's activities and for us to carry out this processing we require you to positively opt in by completing the boxes below.

'I am happy for you to communicate with me regarding additional club activities via the following means':

Email		*Mobile*	

We have a copy our clubs privacy policy on the Main Notice Board in the entrance hall and on our website. 'I understand that should my membership application be successful I will be bound by the Club's articles/rules/constitution. *Please tick the box.* ☐

I consent to the Club giving my telephone numbers to other Members in order that they may contact me regarding competitions etc. *Please tick the box.* ☐

By signing below, I confirm I am over the age of 16 and have read, understood, and agree with the way my data will be used by the Golf Club. *If under the age of 16 a parent or guardian must sign this form on your behalf.*

It should be noted that abusive or violent behavior in or on the club premises will not be tolerated. Such behavior may result in an automatic ban from the golf club and subscriptions paid will NOT be reimbursed. Kindly read and adhere to the 'club rules' which can be found on our website.

On joining the club as a member, you are agreeing to pay the subscription fee in-full, from the date of joining until the 31st of May. Subscriptions are non-refundable for any reason such as illness, injury, or course closure etc.

Signature: (Applicant/Guardian) *delete as appropriate* _____ **Date:** _____

Office Use

MEM. No.	CLUB V1	BRS	DATE OF EMAIL
PHOTO RECD	CARD ISSUED	V1 PIC UPDATE	DATE PROCESSED

Subs Pro Rata £_____ **12 Months Subs £**_____ **Total Payable on Joining: £**_____